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Workers Memorial Day — April 28, 2010

Workers Memorial Day recognizes those workers who died or sustained work-related injuries or illnesses during the previous year. In 2008, a total of 5,071 U.S. workers died from occupational injuries (*1*), and 49,000 deaths annually are attributed to work-related illnesses (*2*). In 2008, an estimated 3.7 million workers in private industry and 940,000 in state and local government had a nonfatal occupational injury or illness; 40%–50% of these workers were transferred, placed on work restrictions, or took time away from work (*3*). An estimated 3.4 million workers were treated in emergency departments for occupational injuries and illnesses in 2007, and approximately 94,000 were hospitalized (CDC, unpublished data, 2010).

Work-related injuries and deaths are costly. Employers and insurers spent nearly $85 billion on workers' compensation in 2007 (*4*). Those expenditures are only a portion of the costs borne by employers, workers, and society overall, including costs paid by other insurance systems and most of the costs of work-related illness. Additional information on workplace safety and health is available from CDC at http://www.cdc.gov/niosh.

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Occupational Injuries and Deaths Among Younger Workers — United States, 1998–2007

Younger workers (defined as those aged 15–24 years) represent 14% of the U.S. labor force and face high risk for injury while on the job (*1–4*). To assess trends and help guide efforts to improve young worker safety, CDC's National Institute for Occupational Safety and Health (NIOSH) analyzed data from the Census of Fatal Occupational Injuries (CFOI) and the National Electronic Injury Surveillance System occupational supplement (NEISS-Work) for the period 1998–2007. This report summarizes the results of that analysis. During the 10-year period, 5,719 younger workers died from occupational injuries. The fatality rate for younger workers was 3.6 deaths per 100,000 full-time equivalent workers (FTE) (one FTE = 2,000 hours worked per year) and was lower than the rate for older workers (defined as aged ≥25 years) (4.4 deaths per 100,000 FTE). The fatality rate decreased an estimated 14% during the 10-year period. For the same period, an estimated 7.9 million nonfatal injuries to younger workers were treated in U.S. hospital emergency departments (EDs). The nonfatal injury rate was 5.0 ED-treated injuries per 100 FTE and was approximately two times higher than among workers aged ≥25 years. The rate of nonfatal injuries among younger workers declined 19%, but the decline was not statistically significant. Public health, labor, and trade organizations should provide guidance to employers to help them in their responsibilities to provide safer workplaces and should identify steps that employers can take to remove or reduce injury hazards. Employers need to ensure that their younger workers have the

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requisite training and personal protective equipment to perform their jobs safely.

For CFOI, the Bureau of Labor Statistics (BLS) collects data on occupational injury deaths from multiple sources, including death certificates, police reports, and workers' compensation reports.[*] To be included in CFOI, the decedent must have been employed at the time of incident, working as a volunteer in the same functions as a paid employee, or present at a site as a job requirement (*5*). CFOI includes deaths of all youths working on family farms and other businesses. The event or exposure causing death is classified according to the Occupational Injury and Illness Classification System (OIICS) (*5*). To calculate fatality rates, labor force denominator estimates were derived from the U.S. Current Population Survey (CPS)[†] for workers aged ≥15 years (*3*). Beginning in 2003, the decedents' industry was reported according to the North American Industry Classification System (NAICS).[§] Industry coding before 2003 was not compatible with this system; therefore, for this report, industry information is only given for deaths occurring during 2003–2007.

The NEISS-Work ED-based surveillance system tracks nonfatal work-related injuries and illnesses treated in EDs by using a national stratified probability sample of 67 U.S. hospitals.[¶] For NEISS-Work, injuries or illnesses are determined to be work related when the ED chart indicates that the incident occurred to a civilian noninstitutionalized person while working for pay or other compensation, working on a farm, or volunteering for an organized group (*2*). Trained personnel abstract information regarding

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[*] NIOSH receives a CFOI research file through a Memorandum of Understanding from BLS.

[†] CPS is the primary source of U.S. labor force statistics. For CPS, the U.S. Census Bureau surveys approximately 50,000 households monthly to collect employment, unemployment, earnings, hours of work, and other indicators.

[§] NAICS is the standard for classifying business establishments; additional information available at http://www.census.gov/eos/www/naics.

[¶] NIOSH collects NEISS-Work data in collaboration with the Consumer Product Safety Commission (CPSC), which operates the base NEISS hospital system for the collection of data on consumer product–related injuries. The CPSC product-related injury estimates exclude work-related injuries, whereas NEISS-Work estimates include all work-related injuries regardless of product involvement (i.e., NEISS and NEISS-Work cases are mutually exclusive). Because of hospital closures and other nonparticipation/nonresponse factors, the number of reporting hospitals varied during the study period.

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What is already known on this topic?

Younger workers (those aged 15–24 years) are overrepresented in jobs with injury hazards.

What is added by this report?

Among younger workers, the rates of fatal and nonfatal work injuries declined moderately during 1998–2007, and younger workers experienced nearly twice the risk for nonfatal injury compared with older workers.

What are the implications for public health practice?

Measures to increase employers' knowledge about injury risks for younger workers and the steps that employers can take to improve safety should be more widely disseminated and implemented.

worker, injury/illness, and incident characteristics from medical records at each participating hospital. The event or exposure causing injury is classified according to the OIICS (*5*). Industry data are not available for NEISS-Work.

NEISS-Work cases were assigned statistical weights based on a sampling frame of national hospital ED visits. The weights were summed to provide national estimates of the number of work-related ED-treated injuries and illnesses. For nonfatal injury rates, CPS labor force denominator estimates were used (*3*). Ninety-five percent confidence intervals (CIs) for number and rate of injury took into account the variance arising from the stratified sample. Variances for rates also took into account the denominator variance by using the BLS approximate standard error formulas derived for the CPS (*3*). Trends in fatal and nonfatal injury rates were tested for statistical significance by using Poisson regression analysis.

During 1998–2007, a total of 5,719 fatal injuries among younger workers were identified (average of 572 per year) (Table 1). An estimated 10-year decline of 14% ($p<0.001$) was observed in the rate of deaths, as well as an estimated 19% decline in the rate of nonfatal work injuries among younger workers, although the latter decline was not statistically significant ($p=0.3$) (Figure). Among younger workers, the highest nonfatal injury rates were experienced by workers aged 18 and 19 years, at 6.3 (CI = ±2.0) and 5.9 (CI = ±1.8) injuries per 100 FTE, respectively. The younger worker nonfatal injury rate was twofold higher than the rate for older workers (5.0 ED-treated injuries per 100 FTE compared with 2.4, respectively) (Table 2).

Younger Hispanic workers had a fatality rate (5.6 per 100,000 FTE [$p=0.1$]) that was significantly higher than the rate for non-Hispanic white workers (3.3 per 100,000 FTE; $p<0.001$) and the rate for non-Hispanic black workers (2.3 per 100,000 FTE; $p<0.001$) (Table 1). In contrast, the rate of nonfatal ED-treated injuries for younger Hispanic workers was not significantly different from younger, non-Hispanic white and black workers (2.3 versus 4.5 per 100 FTE [$p=0.06$ for white workers] and 2.3 versus 3.8 per 100 FTE [$p=0.1$ for black workers]) (Table 2). Similar to older workers, younger male workers experienced higher rates of fatal and nonfatal injuries than younger female workers.

Transportation-related deaths, largely highway incidents, were the most frequently recorded events among all age groups (Table 1).[**] Transportation events included incidents involving all forms of transportation and powered industrial equipment when the incident resulted in an injury from a collision, loss of vehicle control, sudden vehicle stop, or a pedestrian/worker being struck by a vehicle. Highway incidents occurred on public roadways, shoulders, or surrounding areas (excluding incidents off the highway/street or on industrial, commercial, or farm premises or parking lots). For nonfatal injuries, contact with objects or equipment was the most common event for all age groups but accounted for a larger proportion of injuries among younger workers (49%) compared with older workers (40%) (Table 2). The contact injuries largely involved the worker being struck by or against, rubbed or abraded, or caught in or crushed by various tools, equipment, machinery, parts, or materials.

Results for fatal injuries classified by industry indicate that, during 2003–2007, the greatest number of fatal injuries among younger workers occurred in the services (32%), construction (28%), wholesale and retail trade (10%), and agriculture (10%) industry sectors. Younger workers experienced the highest rates of fatal injury in mining (36.5 per 100,000 FTE), agriculture (21.3 per 100,000 FTE), and construction (10.9 per 100,000 FTE).

Reported by

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[**] CFOI includes deaths of workers traveling between job sites but not commuting to or from work.

TABLE 1. Number[*] and rate[†] of fatal occupational injuries, by age group, race/ethnicity, sex, and event or exposure — United States, 1998–2007

	Persons aged 15–17 yrs				Persons aged 15–24 yrs				Persons aged ≥25 yrs				Rate ratio (RR) of persons aged 15–24 yrs to persons aged ≥25 yrs		
Characteristic	No.	(%[§])	Rate	(95% CI[¶])	No.	(%)	Rate	(95% CI)	No.	(%)	Rate	(95% CI)	RR	(95% CI)	p value
Total	**374**	**(100)**	**2.9**	**(±0.5)**	**5,719**	**(100)**	**3.6**	**(±0.2)**	**51,150**	**(100)**	**4.4**	**(<0.1)**	**0.8**	**(<0.1)**	**<0.001**
Race/Ethnicity[**]															
White, non-Hispanic	243	(65)	2.5	(±0.5)	3,543	(62)	3.3	(±0.2)	36,894	(72)	4.4	(<0.1)	0.7	(<0.1)	<0.001
Black, non-Hispanic	17	(5)	1.4	(±1.4)	420	(7)	2.3	(±0.4)	5,107	(10)	4.1	(±0.2)	0.6	(±0.2)	<0.001
Hispanic	102	(27)	6.3	(±3.2)	1,503	(26)	5.6	(±0.8)	6,834	(13)	5.1	(±0.2)	1.1	(±0.1)	0.1
Other, non-Hispanic	—[††]	—	—	—	214	(4)	3.0	(±0.7)	1,986	(4)	3.1	(±0.1)	1.0	(±0.2)	0.4
Sex															
Male	335	(90)	4.9	(±0.8)	5,281	(92)	6.0	(±0.4)	47,240	(92)	7.0	(±0.1)	0.9	(<0.1)	<0.001
Female	39	(10)	0.6	(±0.2)	438	(8)	0.6	(<0.1)	3,910	(8)	0.8	(<0.1)	0.8	(<0.1)	<0.001
Event or exposure[§§]															
Contact with objects and equipment	70	(19)			997	(17)			8,469	(17)					
Falls	34	(9)			614	(11)			6,771	(13)					
Bodily reaction and exertion	—[††]	—			—	—			114	(<1)					
Exposure to harmful substances or environments	40	(11)			722	(13)			4,336	(8)					
Transportation incidents	178	(48)			2,399	(42)			22,202	(43)					
Fires and explosions	6	(2)			192	(3)			1,593	(3)					
Assaults and violent acts	45	(12)			788	(14)			7,627	(15)					

[*] The number of deaths is derived from the U.S. Department of Labor's Bureau of Labor Statistics (BLS) Census of Fatal Occupational Injuries. Additional information available at http://www.bls.gov/iif/oshcfoi1.htm.

[†] Fatal rates are per 100,000 full-time equivalent (FTE) workers; one FTE = 2,000 hours worked per year and includes hours for all jobs worked by a person; FTE are derived from the BLS Current Population Survey. Additional information available at http://www.bls.gov/cps/home.htm.

[§] Percentages might not sum to 100 because of rounding.

[¶] Confidence interval.

[**] Deaths of workers with race/ethnicity unidentified accounted for <1% of all deaths; workers with Hispanic ethnicity might be of any race.

[††] Did not meet minimum reporting requirements.

[§§] Classified according to the BLS Occupational Injury and Illness Classification System (additional information available at http://www.bls.gov/iif/oshoiics.htm); included in the total number of deaths are nonclassifiable fatal injury events and exposures accounting for <0.1% of all deaths; rates are not given for event or exposure characteristics.

Editorial Note

The analysis in this report indicates declines in the rates of fatal and nonfatal ED-treated injuries among younger workers (i.e., those aged 15–24 years) during 1998–2007. The decline in the fatality rate was moderate, 14% over the 10-year period, and the 19% decline in the rate of nonfatal injuries did not reach statistical significance. *Healthy People 2010* set a goal to reduce the rate of ED-treated work injuries among persons aged 15–17 years by 30%, to a rate of 3.5 per 100 FTE.[††] The rate for the most recent year in this analysis was 4.2 per 100 FTE, short of the goal. Research into the contributors to these declines and barriers to further declines has not been conducted but would be helpful in focusing future efforts. The proposed *Healthy People 2020* objective expands the definition of adolescent workers to include workers aged 18–19 years[§§] because persons aged 18–19 years have the highest injury rates among younger workers.

Higher rates of nonfatal injuries among younger workers also have been observed in other countries (*4*). A systematic review found consistent evidence that injuries were associated with increased hazards in workplaces of younger workers (e.g., use of ladders and knives), a perceived work overload (e.g., pressure to complete work more quickly), and minority status (*4*). Lack of job knowledge, training, and skills might contribute to increased risk among younger workers, who might be less likely to recognize hazards, less likely to speak up regarding safety, and less aware of their legal rights as workers (*1*). This might be exacerbated for some groups of workers, such as Hispanics (*6*) and workers in their first jobs.

[††] *Healthy People 2010* objective 20-02h: reduce work-related injuries among adolescent workers (aged 15–17 years). Additional information available at http://www.healthypeople.gov/data/midcourse/html/focusareas/fa20objectives.htm.

[§§] *Healthy People 2020* occupational safety and health objective HP2020–8c: reduce nonfatal work-related injuries among adolescent workers (aged 15 to 19 years). Additional information available at http://healthypeople.gov/hp2020/objectives/topicareas.aspx.

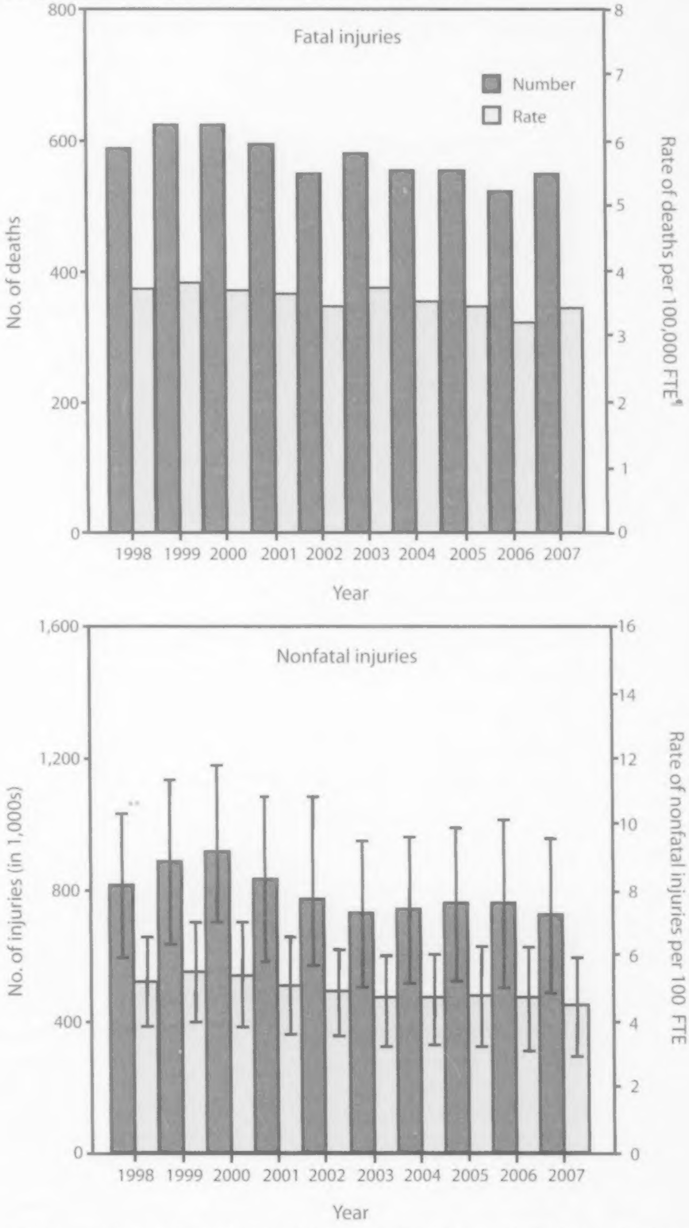
The finding of lower nonfatal injury rates among Hispanic workers is inconsistent with the patterns of fatality rates observed in this study and findings in other studies using various data sources (*7*). Hispanic workers might be less likely to report work as the place of injury and to seek hospital care for less severe nonfatal injuries (*7*).

The primary responsibility for workplace safety lies with employers (*8*). Thus, reductions in younger worker injuries and deaths will require employers to make changes in work environments and workplace practices. General guidance on using a hierarchy of controls to improve worker safety (*8*), as well as specific recommendations to employers focused on protecting the youngest workers from injuries, is available (*1*). Workers also have responsibilities for complying with employer policies and practices for safe work, and ideally can identify unsafe conditions and develop safe solutions (*8*). Public health and safety practitioners, trade and labor organizations, and researchers also can contribute to younger worker safety by providing recommendations to employers on avoiding risks to these less experienced workers (*8*).

The findings in this report are subject to at least four limitations. First, NEISS-Work data only include workers treated in EDs, estimated to comprise only one third of work injuries treated among all medical venues (*2*). Second, large standard errors arising from the NEISS-Work sample design reduce the power to detect statistically significant nonfatal injury trends. Third, for both NEISS-Work and CFOI, inclusion of cases is dependent upon identifying work-relatedness; such determinations can be difficult for certain types of incidents where the work-relationship might not be clear or where workers do not wish to identify the work connection. Finally, both systems include injuries to volunteers. However, volunteers are not included in the CPS denominator, potentially resulting in an overestimation of injury rates.

Employers should assess injury hazards in their workplaces, take steps to remove or reduce the injury potential, and ensure their workers have the requisite training and personal protective equipment to perform their jobs safely. Employers should be aided by health and safety practitioners, as well as others, in providing better guidance and tools to improve

FIGURE. Number and rate of fatal* and nonfatal† occupational injuries among younger workers,§ by year — United States, 1998–2007



* Fatal occupational injury data are from the U.S. Department of Labor's Bureau of Labor Statistics (BLS) Census of Fatal Occupational Injuries. Additional information available at http://www.bls.gov/iif/oshcfoi1.htm.

† Data for nonfatal occupational injuries treated in U.S. hospital emergency departments are from the National Electronic Injury Surveillance System occupational supplement (NEISS-Work). Additional information available at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5616a3.htm.

§ Workers aged 15–24 years.

¶ Full-time equivalent workers (FTE); one FTE = 2,000 hrs worked per year; FTE are derived from the BLS Current Population Survey. Additional information available at http://www.bls.gov/cps/home.htm.

** Error bars represent the 95% confidence interval (no error bars are shown for fatality census counts or the fatality rates; confidence intervals for rates were less than ±0.1).

TABLE 2. Number[*] and rate[†] of nonfatal occupational injuries treated in U.S. hospital emergency departments, by age group, race/ethnicity, sex, and event or exposure — United States, 1998–2007

	Persons aged 15–17 yrs					Persons aged 15–24 yrs					Persons aged ≥25 yrs					Rate ratio (RR) of persons aged 15–24 yrs to persons aged ≥25 yrs		
Characteristic	No. (1,000s)	(95% CI[§]) (1,000s)	(%[¶])	Rate	(95% CI)	No. (1,000s)	(95% CI) (1,000s)	(%)	Rate	(95% CI)	No. (1,000s)	(95% CI) (1,000s)	(%)	Rate	(95% CI)	RR	(95% CI)	p value
Total	**598**	**(±117)**	**(100)**	**4.6**	**(±1.2)**	**7,946**	**(±2,256)**	**(100)**	**5.0**	**(±1.4)**	**28,225**	**(±5,480)**	**(100)**	**2.4**	**(±0.5)**	**2.0**	**(±0.3)**	**<0.001**
Race/Ethnicity[**]																		
White, non-Hispanic	386	(±109)	(65)	4.0	(±1.4)	4,871	(±2,044)	(61)	4.5	(±1.9)	16,296	(±4,763)	(58)	1.9	(±0.6)	2.3	(±0.5)	<0.001
Black, non-Hispanic	47	(±19)	(8)	3.9	(±2.7)	674	(±260)	(8)	3.8	(±1.6)	3,474	(±1,511)	(12)	2.8	(±1.2)	1.3	(±0.6)	0.1
Hispanic	29	(±13)	(5)	1.8	(±1.2)	631	(±275)	(8)	2.3	(±1.1)	2,052	(±1,107)	(7)	1.5	(±0.8)	1.5	(±0.7)	<0.1
Sex																		
Male	376	(±75)	(63)	5.5	(±1.9)	5,527	(±1,635)	(70)	6.2	(±1.9)	19,236	(±3,830)	(68)	2.8	(±0.6)	2.2	(±0.4)	<0.001
Female	222	(±44)	(37)	3.6	(±1.2)	2,418	(±634)	(30)	3.4	(±0.9)	8,983	(±1,693)	(32)	1.8	(±0.3)	1.8	(±0.3)	<0.001
Event or exposure[††]																		
Contact with objects and equipment	309	(±67)	(52)			3,898	(±1,173)	(49)			11,267	(±2,271)	(40)					
Falls	80	(±16)	(13)			904	(±230)	(11)			4,376	(±844)	(16)					
Bodily reaction and exertion	83	(±20)	(14)			1,710	(±580)	(22)			7,120	(±1,759)	(25)					
Exposure to harmful substances or environments	85	(±17)	(14)			754	(±155)	(9)			2,421	(±397)	(9)					
Transportation incidents	—[§§]	—				154	(±49)	(2)			769	(±176)	(3)					
Fires and explosions	—	—				48	(±14)	(1)			214	(±56)	(1)					
Assaults and violent acts	18	(±4)	(3)			294	(±99)	(4)			1,246	(±221)	(4)					

[*] The number of nonfatal injuries treated in hospital emergency departments is derived from the National Electronic Injury Surveillance System occupational supplement (NEISS-Work). Additional information available at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5616a3.htm.

[†] Nonfatal rates are per 100 full-time equivalent (FTE) workers; one FTE = 2,000 hours worked per year and includes hours for all jobs worked by a person; FTE are derived from the Current Population Survey. (Additional information available at http://www.bls.gov/cps/home.htm.

[§] Confidence interval.

[¶] Percentages might not sum to 100 because of rounding.

[**] Injured workers with other, non-Hispanic race/ethnicity accounted for nearly 2% of all injured workers; injured workers with unidentified race/ethnicity accounted for nearly 21% of all injured workers; workers with Hispanic ethnicity might be of any race.

[††] Classified according to the U.S. Department of Labor's Bureau of Labor Statistics (BLS) Occupational Injury and Illness Classification System (additional information available at http://www.bls.gov/iif/oshoiics.htm); included in the total number of injuries are nonclassifiable injury events and exposures accounting for <3% of all injuries; rates are not given for event or exposure characteristics.

[§§] Did not meet minimum reporting requirements.

young worker safety. NIOSH recently introduced school curricula (*9*), which can help students identify workplace health and safety hazards, take measures to reduce risk for injury, and understand their rights as workers. The curricula would ensure that younger persons possess basic safety knowledge when they begin their work lives, and increase the potential for them to play active roles in workplace efforts to identify injury hazards and effective control strategies (*8*). NIOSH is encouraging widespread use of these free curricula in the nation's schools. NIOSH continues to conduct and support surveillance, research, and outreach for younger worker safety (*10*). One example is the ongoing comprehensive Childhood Agricultural Injury Prevention Initiative, which demonstrates the potential for substantial reductions with dedicated efforts. Periodic surveys of farm operators (CDC, unpublished data, 2010) have continued to show declines in work-related injury rates beyond the 30% reported during 1998–2004 (*10*).

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Seroprevalence of Herpes Simplex Virus Type 2 Among Persons Aged 14–49 Years — United States, 2005–2008

Herpes simplex virus type 2 (HSV-2) is one of the most common sexually transmitted infections worldwide and the primary cause of genital and neonatal herpes and genital ulcer disease (*1*). Multiple studies have shown that HSV-2 infection increases the risk for human immunodeficiency virus (HIV) infection by at least twofold (*2*). HSV-2 infection is lifelong, and serologic testing provides the best method to estimate HSV-2 prevalence. Since 1976, CDC has monitored HSV-2 seroprevalence in the United States through the National Health and Nutrition Examination Survey (NHANES). After increasing from 1976–1980 (NHANES II) to 1988–1994 (NHANES III), HSV-2 seroprevalence decreased, from 21.0% in 1988–1994 to 17.0% in NHANES 1999–2004 (*1*). To determine whether HSV-2 seroprevalence in the United States has changed since 1999–2004 and to estimate HSV-2 seroprevalence by age, race/ethnicity, and reported lifetime number of sex partners, CDC analyzed serologic test results from persons aged 14–49 years who participated in NHANES 2005–2008. The results indicated that HSV-2 seroprevalence was 16.2% overall, not statistically different from the seroprevalence in 1999–2004. Seroprevalence was highest among women (20.9%) and non-Hispanic blacks (39.2%). Of those infected with HSV-2, 81.1% had not received a diagnosis. Clinicians, health departments, health-care organizations, and community groups should promote measures that prevent HSV-2 transmission, including minimizing the number of sex partners, avoiding concurrent sexual partnerships, and using condoms consistently and correctly. Patients with known HSV-2 infection should be tested for HIV.

NHANES surveys are cross-sectional surveys designed to compile nationally representative statistics on the health of the U.S. civilian, noninstitutionalized population through complex, multistage probability sampling. During NHANES 2005–2008, a total of 8,283 persons aged 14–49 years were interviewed. Of these, 8,002 had a medical examination; sera were collected from 7,293 participants (88% of those interviewed) for testing of HSV-2 antibodies using a type-specific immunodot assay. Seroprevalence was analyzed by sex, age group, number of lifetime sex partners, and three racial/ethnic categories (non-Hispanic white, non-Hispanic black, and Mexican American). Participants also were asked, "Has a doctor or other health-care professional ever told you that you had genital herpes?" Statistical software was used to generate seroprevalence estimates and 95% confidence intervals. All seroprevalence estimates were weighted using medical examination weights of the survey to represent the U.S. civilian, noninstitutionalized population, accounting for survey participants' unequal probabilities of selection and adjustments for nonresponse. Differences in seroprevalence among categories of participants (e.g., sex or age group) were assessed using the Wald chi-square test.

Overall HSV-2 seroprevalence from NHANES 2005–2008 was 16.2%, not statistically different from the 17.0% seroprevalence in NHANES 1999–2004 ($p = 0.34$). Of those testing positive for HSV-2 infection, 81.1% said they had never been told by a doctor or health-care professional that they had genital herpes. Seroprevalence increased with age, ranging from 1.4% among those aged 14–19 years to 26.1% among those aged 40–49 years ($p<0.001$) (Table). HSV-2 seroprevalence was greater among women (20.9%) than men (11.5%) ($p<0.001$).

By race/ethnicity, HSV-2 seroprevalence was approximately three times greater among non-Hispanic blacks (39.2%) as among non-Hispanic whites (12.3%) ($p<0.001$). Seroprevalence was greatest among non-Hispanic blacks in the 30–39 years (56.2%) and 40–49 years (56.0%) age groups (Figure 1). In contrast, seroprevalence was 20.8% for non-Hispanic whites aged 40–49 years, and 20.4% for Mexican Americans aged 40–49 years. For all three racial/ethnic groups, HSV-2 seroprevalence generally was greater among those with more lifetime sex partners (Figure 2). For example, among persons with two to four lifetime sex partners, seroprevalence was 9.1% for non-Hispanic whites, 34.3% for non-Hispanic blacks, and 13.0% for Mexican Americans. Among persons with 10 or more lifetime sex partners, seroprevalence was 22.7% for non-Hispanic whites, 49.9% for non-Hispanic blacks, and 17.1% for Mexican Americans. (Figure 2).

TABLE. Herpes simplex virus type 2 seroprevalence[*] among persons aged 14–49 years, by selected characteristics — National Health and Nutrition Examination Survey, United States, 2005–2008

	Overall			Female			Male		
Characteristic	Sample size	Sero-prevalence (%)	(95% CI[†])	Sample size	Sero-prevalence (%)	(95% CI)	Sample size	Sero-prevalence (%)	(95% CI)
Total	**7,293**	**16.2**	**(14.6–17.9)**	**3,778**	**20.9**	**(18.9–23.1)**	**3,515**	**11.5**	**(9.8–13.3)**
Age group (yrs)									
14–19	2,287	1.4	(1.0–2.0)	1,115	2.1	(1.4–3.0)	1,172	0.8[§]	(0.3–1.8)
20–29	1,710	10.5	(9.0–12.3)	952	14.4	(11.9–17.3)	758	6.6	(5.3–8.3)
30–39	1,657	19.6	(16.7–22.9)	861	25.2	(21.2–29.7)	796	13.9	(11.1–17.2)
40–49	1,639	26.1	(22.7–29.7)	850	32.3	(28.3–36.5)	789	19.6	(15.2–25.0)
Race/Ethnicity[¶]									
White, non-Hispanic	2,816	12.3	(10.7–14.2)	1,449	15.9	(13.6–18.7)	1,367	8.7	(6.9–10.9)
Black, non-Hispanic	1,742	39.2	(36.7–41.7)	893	48.0	(44.1–52.0)	849	29.0	(26.3–31.9)
Mexican American	1,822	10.1	(8.3–12.3)	944	13.2	(10.8–16.1)	878	7.5	(5.4–10.4)
Reported number of lifetime sex partners[**]									
1	879	3.9	(2.5–6.3)	587	5.4	(3.3–8.8)	292	1.7[§]	(0.7–4.2)
2–4	1,500	14.0	(12.1–16.2)	907	18.8	(16.3–21.5)	593	7.3	(5.3–9.8)
5–9	1,212	16.3	(13.4–19.6)	651	21.8	(17.6–26.7)	561	10.1	(7.6–13.4)
≥10	1,601	26.7	(23.2–30.4)	652	37.1	(33.6–40.8)	949	19.1	(15.2–23.6)

[*] All seroprevalence estimates were weighted using medical examination weights of the survey to represent the U.S. civilian, noninstitutionalized population, accounting for survey participants' unequal probabilities of selection and adjustments for nonresponse.

[†] Confidence interval.

[§] Relative standard error >30%.

[¶] Data for persons of other racial/ethnic groups, including other Hispanic, Asian/Pacific Islander, American Indian/Alaska Native, and persons of multiple race/ethnicity (n = 913), are not presented because of small sample sizes but are included in the overall analyses.

[**] Excludes 2,101 persons who reported never having sex.

Reported by

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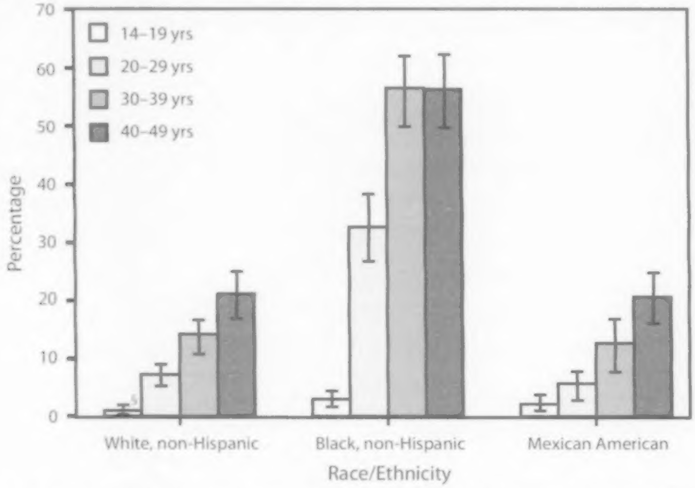
Editorial Note

HSV-2 infection is an important public health concern because of the morbidity associated with symptomatic infection, the potential for high rates of clinical and subclinical recurrences, and the strong association between HSV-2 and HIV infections; genital HSV-2 infection in pregnant women can lead to serious infection in neonates through vertical transmission. This report found an overall HSV-2 seroprevalence of 16.2% for the period 2005–2008, not statistically different from the 17.0% seroprevalence found for 1999–2004. As observed in previous surveys (*1*), CDC found large racial/ethnic disparities in HSV-2 seroprevalence. Most notably, HSV-2 seroprevalence among non-Hispanic blacks was approximately three times that of non-Hispanic whites and nearly four times that of Mexican Americans. This racial disparity is particularly important because non-Hispanic blacks also are at greater risk for HIV acquisition, making up 12% of the adult and adolescent U.S. population but accounting for 46% of persons living with HIV (*3*).

Persons infected with HSV-2 are at greater risk for HIV acquisition, even in the absence of HSV-2 symptoms (*2*). Increased susceptibility to HIV infection likely occurs because even HSV-2 ulcerations that are microscopic can provide a portal of entry for HIV, and HSV-2 reactivation recruits potential target cells for HIV to the genital skin and mucosa. Two large randomized controlled trials among persons who were HSV-2-infected and HIV negative found that daily antiviral (acyclovir) therapy to suppress HSV-2 infection did not decrease the risk for HIV acquisition (*4*). Thus, primary prevention of HSV-2 infection might be the only available strategy to reduce the increased risk for HIV infection associated with HSV-2. Increasing awareness of the high HSV-2 prevalence in the United States and the link between HSV-2 and HIV infections are important first steps in addressing the increased risk for HIV infection, especially among persons at greatest risk for HSV-2 and HIV infections.

FIGURE 1. Herpes simplex virus type 2 seroprevalence* among persons aged 14–49 years, by age group and race/ethnicity† — National Health and Nutrition Examination Survey, United States, 2005–2008

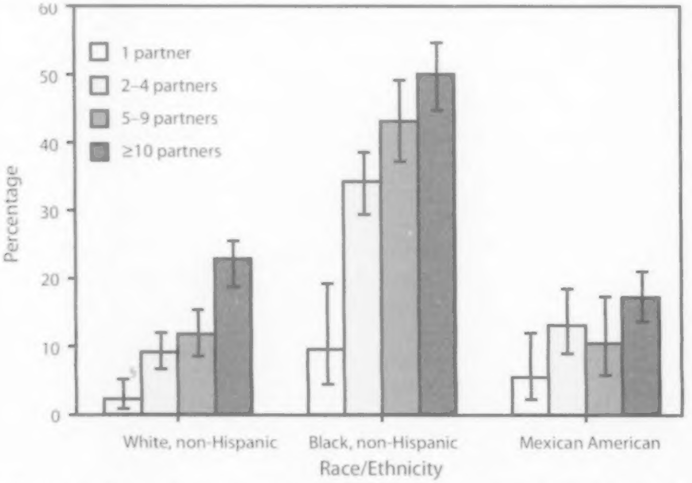


* All seroprevalence estimates were weighted using medical examination weights of the survey to represent the U.S. civilian, noninstitutionalized population, accounting for survey participants' unequal probabilities of selection and adjustments for nonresponse.

† The categories black, non-Hispanic and white, non-Hispanic include persons who reported only one race and exclude persons of Hispanic ethnicity. Persons of Mexican American ethnicity might be of any race.

§ 95% confidence interval.

FIGURE 2. Herpes simplex virus type 2 seroprevalence* among persons aged 14–49 years who reported having had sex, by number of lifetime sex partners and race/ethnicity† — National Health and Nutrition Examination Survey, United States, 2005–2008



* All seroprevalence estimates were weighted using medical examination weights of the survey to represent the U.S. civilian, noninstitutionalized population, accounting for survey participants' unequal probabilities of selection and adjustments for nonresponse.

† The categories black, non-Hispanic and white, non-Hispanic include persons who reported only one race and exclude persons of Hispanic ethnicity. Persons of Mexican American ethnicity might be of any race.

§ 95% confidence interval.

This report found that 81.1% of HSV-2 infections were asymptomatic or unrecognized. Viral shedding and transmission to sex partners can occur in the absence of symptoms or a noticeable lesion (*5*). Multiple prevention strategies used alone or in combination are potentially useful in limiting acquisition and transmission of HSV-2. For persons with symptomatic HSV-2 infection, daily antiviral therapy has been shown to reduce clinical and subclinical reactivation rates of HSV-2 and to reduce the risk for HSV-2 transmission to uninfected partners by 50% (*6*).

CDC recommends that persons with genital herpes avoid sexual activity with uninfected partners when lesions or prodromal symptoms are present because the greater viral shedding that accompanies these symptoms likely increases risk for HSV-2 transmission (*5*). Infected persons also should be counseled regarding the HSV-2 transmission risk associated with viral shedding in the absence of symptoms. Latex condoms, when used consistently and correctly, can reduce HSV-2 transmission. A recent meta-analysis found that persons who reported always using condoms had a 30% decreased risk for acquiring HSV-2 infection compared with persons who reported no condom use (*7*). Additionally, persons with HSV-2 infection should be encouraged to inform partners of their infection status before initiating a sexual relationship.

The findings in this report are subject to at least three limitations. First, NHANES surveys do not assess HSV-2 seroprevalence in military or institutionalized populations; therefore, the estimates are not representative of the entire U.S. population. Second, no information was collected regarding genital symptoms to assess the extent of symptomatic but undiagnosed HSV-2 infection. Finally, because of insufficient sample size, coinfection with HSV-2 and HIV could not be assessed. However, a previous report using data from multiyear NHANES found a strong association between HSV-2 seropositivity and HIV infection in the general population (*8*).

Persons with known HSV-2 infection should be tested for HIV and adopt HIV risk-reduction strategies, such as limiting the number of sex partners and using condoms consistently and correctly. However, in this analysis, 81.1% of seropositive participants reported never having received a diagnosis of HSV-2 infection. A substantial proportion of these persons might have nonspecific signs (e.g., small fissures or localized erythema) or mild symptoms that are not recognized as genital herpes (*9*). Therefore, health-care providers should consider testing for HSV-2 infection in those patients with

What is already known on this topic?

Herpes simplex virus type 2 (HSV-2) is a common sexually transmitted infection in the United States and is associated with an increased risk for human immunodeficiency virus (HIV) infection.

What is added by this report?

During 2005–2008, HSV-2 seroprevalence was 16.2% among persons aged 14–49 years in the United States and higher (39.2%) among non-Hispanic blacks; 81.1% of infected persons had not received a diagnosis.

What are the implications forpublic health practice?

Health-care providers should consider HSV-2 infection in the differential diagnosis of genital complaints consistent with HSV-2 infection; patients with known HSV-2 infection should be tested for HIV. Clinicians, health departments, health-care organizations, and community groups should promote measures that prevent HSV-2 transmission, including minimizing the number of sex partners, avoiding concurrent sexual partnerships, and using condoms consistently and correctly.

either typical or atypical genital complaints, especially when the symptoms are recurrent (*5*).

Routine serologic testing might identify numerous unrecognized HSV-2 infections; however, the role of routine serologic screening in population-based prevention efforts has been controversial (*10*). Serologic HSV-2 testing is not recommended currently for the general population because of concerns related to test performance in low-prevalence settings and a lack of data regarding the benefits of screening (*10*). Nonetheless, HSV serologic screening might be useful in selected populations at high risk, such as persons with multiple sex partners or HIV infection, and men who have sex with men (*5*). Additional research is needed to determine the benefits, feasibility, and cost effectiveness of serologic testing, alone or in combination with antiviral treatment, to prevent HSV-2 acquisition and transmission (*10*). Finally, research into development of an HSV-2 vaccine should continue and might result in a more effective preventive measure in the future.

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Announcement

World Malaria Day — April 25, 2010

Counting Malaria Out is the theme of this year's World Malaria Day, commemorated on April 25. Worldwide, malaria causes an estimated 1 million deaths each year. Nearly 90% of these deaths occur among young children in Africa (*1*).

Counting Malaria Out also is the theme of a campaign to further reduce malaria worldwide. The Roll Back Malaria Partnership is a global framework for coordinated action against malaria founded by UNICEF, the World Health Organization, the World Bank, and the United Nations Development Programme. It encourages malaria-endemic countries, Roll Back Malaria partners, and donors to put extra efforts into achieving universal coverage with malaria interventions by 2010, near-zero deaths by 2015, and the eventual elimination of malaria (*2*). Since 2000, when 44 African leaders committed their countries to cutting malaria deaths in half by 2010, increasing resources have boosted malaria control efforts. Those interventions are showing progress, with decreased malaria-related morbidity and mortality in Mozambique, Rwanda, Tanzania, Zambia, and Zanzibar (*1*).

CDC contributes to malaria control through the President's Malaria Initiative (PMI), a U.S. government interagency initiative to reduce the malaria burden in 15 countries in sub-Saharan Africa. The U.S. Agency for International Development (USAID) leads PMI, and USAID and CDC jointly implement the initiative, in collaboration with host ministries of health and local and international partners.

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Errata

Vol. 59, No. 8

In "Identifying Infants with Hearing Loss — United States, 1999–2007," an error occurred in the second sentence of the paragraph before "Reported by" on page 221. The sentence should read as follows: "The percentage of infants receiving recommended diagnostic follow-up before age 3 months increased from **51.5%** in 2005 to 66.4% in 2007, based on data from 44 states and territories." In addition, in Table 2 on page 222, the number and percentage for 2005, diagnosed before age 3 months, should be **9,106** and **51.5%**.

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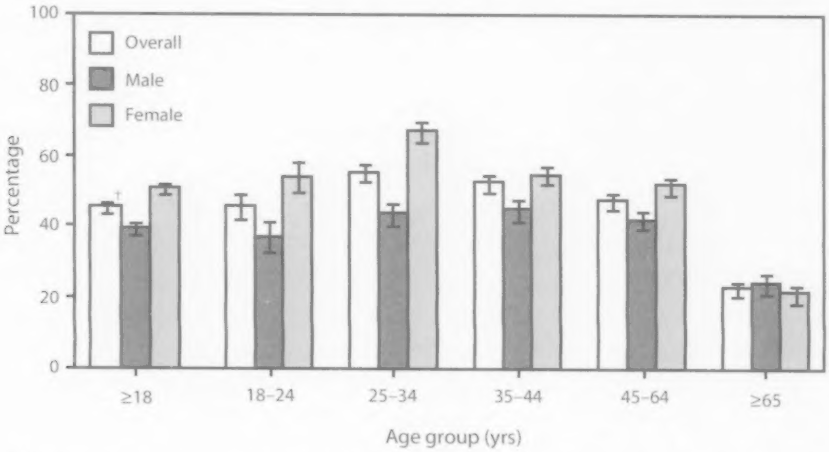
In "Final 2008 Reports of Nationally Notifiable Infectious Diseases," an error occurred in Table 2, "Reported cases of notifiable diseases, by geographic division and area — United States, 2008." On page 869, under the column titled "Varicella Mortality," the total case count for C.N.M.I. should read "—."

QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Percentage of Adults Aged ≥18 Years Who Looked Up Health Information on the Internet, by Age Group and Sex*— National Health Interview Survey, United States, January–September 2009



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* Estimates are based on survey data collected during January–September 2009 in response to the question, "Did you look up health information on the Internet in the past 12 months?" (Approximately 1% of those sampled did not respond to the question.)

† 95% confidence interval.

During January–September 2009, 45.6% of adults aged ≥18 years said they had looked up health information on the Internet in the past 12 months. Overall, the percentage was higher among women (51.0%) than men (39.8%). Among age groups, the percentage was highest among persons aged 25–34 years (55.6%) and lowest among persons aged ≥65 years (23.0%). In each group aged ≤65 years, a higher percentage of women than men said they had looked up health information on the Internet.

SOURCE: National Health Interview Survey, 2009, sample adult core component. Data are based on household interviews of a sample of the civilian noninstitutionalized population. The estimates are being released before final data editing and final weighting to provide earlier public access. The resulting estimates generally are within 0.1 to 0.3 percentage points of the final data files.

Notifiable Diseases and Mortality Tables

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending April 17, 2010 (15th week)[*]

Disease	Current week	Cum 2010	5-year weekly average[†]	Total cases reported for previous years					States reporting cases during current week (No.)
				2009	2008	2007	2006	2005	
Anthrax	—	—	—	1	—	1	1	—	
Botulism, total	—	12	2	103	145	144	165	135	
foodborne	—	—	0	12	17	32	20	19	
infant	—	11	1	67	109	85	97	85	
other (wound and unspecified)	—	1	1	24	19	27	48	31	
Brucellosis	5	22	2	119	80	131	121	120	ND (2), FL (1), AZ (1), CA (1)
Chancroid	—	20	1	35	25	23	33	17	
Cholera	—	—	0	19	5	7	9	8	
Cyclosporiasis[§]	—	19	3	132	139	93	137	543	
Diphtheria	—	—	—	—	—	—	—	—	
Domestic arboviral diseases[§,¶]:									
California serogroup virus disease	—	—	0	54	62	55	67	80	
Eastern equine encephalitis virus disease	—	—	—	4	4	4	8	21	
Powassan virus disease	—	—	0	6	2	7	1	1	
St. Louis encephalitis virus disease	—	—	0	12	13	9	10	13	
Western equine encephalitis virus disease	—	—	—	—	—	—	—	—	
Haemophilus influenzae,[**] invasive disease (age <5 yrs):									
serotype b	—	4	0	29	30	22	29	9	
nonserotype b	2	53	4	233	244	199	175	135	MN (1), FL (1)
unknown serotype	3	70	4	218	163	180	179	217	NY (2), ID (1)
Hansen disease[§]	1	12	2	77	80	101	66	87	CA (1)
Hantavirus pulmonary syndrome[§]	—	1	0	14	18	32	40	26	
Hemolytic uremic syndrome, postdiarrheal[§]	—	30	3	241	330	292	288	221	
HIV infection, pediatric (age <13 yrs)[††]	—	—	1	—	—	—	—	380	
Influenza-associated pediatric mortality[§,§§]	—	47	2	360	90	77	43	45	
Listeriosis	2	126	12	804	759	808	884	896	TX (1), AZ (1)
Measles[¶¶]	5	12	3	66	140	43	55	66	CA (5)
Meningococcal disease, invasive[***]:									
A, C, Y, and W-135	2	75	7	295	330	325	318	297	OH (1), FL (1)
serogroup B	1	31	3	149	188	167	193	156	FL (1)
other serogroup	—	3	1	24	38	35	32	27	
unknown serogroup	6	129	15	477	616	550	651	765	OH (1), VA (1), TX (1), OR (1), CA (2)
Mumps	45	785	115	1,886	454	800	6,584	314	NY (17), NYC (28)
Novel influenza A virus infections[†††]	—	—	0	43,771	2	4	NN	NN	
Plague	—	—	0	8	3	7	17	8	
Poliomyelitis, paralytic	—	—	—	—	—	—	—	1	
Polio virus Infection, nonparalytic[§]	—	—	—	—	—	—	NN	NN	
Psittacosis[§]	—	4	0	9	8	12	21	16	
Q fever, total[§,§§§]	—	15	2	97	120	171	169	136	
acute	—	10	1	79	106	—	—	—	
chronic	—	5	—	18	14	—	—	—	
Rabies, human	—	—	0	4	2	1	3	2	
Rubella[¶¶¶]	—	1	0	3	16	12	11	11	
Rubella, congenital syndrome	—	—	0	1	—	—	1	1	
SARS-CoV[§,****]	—	—	—	—	—	—	—	—	
Smallpox[§]	—	—	—	—	—	—	—	—	
Streptococcal toxic-shock syndrome[§]	5	44	4	152	157	132	125	129	NY (1), PA (1), OH (1), MN (2)
Syphilis, congenital (age <1 yr)	—	28	8	369	431	430	349	329	
Tetanus	—	—	0	18	19	28	41	27	
Toxic-shock syndrome (staphylococcal)[§]	1	26	1	75	71	92	101	90	NY (1)
Trichinellosis	—	—	0	11	39	5	15	16	
Tularemia	—	3	1	90	123	137	95	154	
Typhoid fever	2	84	6	367	449	434	353	324	VA (1), GA (1)
Vancomycin-intermediate *Staphylococcus aureus*[§]	1	17	1	75	63	37	6	2	MO (1)
Vancomycin-resistant *Staphylococcus aureus*[§]	—	1	0	—	—	2	1	3	
Vibriosis (noncholera *Vibrio* species infections)[§]	2	40	3	722	588	549	NN	NN	MD (1), CA (1)
Viral Hemorrhagic Fever[††††]	—	1	—	NN	NN	NN	NN	NN	
Yellow fever	—	—	—	—	—	—	—	—	

See Table I footnotes on next page.

TABLE I. (*Continued*) Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending April 17, 2010 (15th week)[*]

—: No reported cases. N: Not reportable. NN: Not Nationally Notifiable Cum: Cumulative year-to-date counts.

[*] Incidence data for reporting years 2009 and 2010 are provisional, whereas data for 2005 through 2008 are finalized.

[†] Calculated by summing the incidence counts for the current week, the 2 weeks preceding the current week, and the 2 weeks following the current week, for a total of 5 preceding years. Additional information is available at http://www.cdc.gov/epo/dphsi/phs/files/5yearweeklyaverage.pdf.

[§] Not reportable in all states. Data from states where the condition is not reportable are excluded from this table, except starting in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm.

[¶] Includes both neuroinvasive and nonneuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for West Nile virus are available in Table II.

[**] Data for *H. influenzae* (all ages, all serotypes) are available in Table II.

[††] Updated monthly from reports to the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. Implementation of HIV reporting influences the number of cases reported. Updates of pediatric HIV data have been temporarily suspended until upgrading of the national HIV/AIDS surveillance data management system is completed. Data for HIV/AIDS, when available, are displayed in Table IV, which appears quarterly.

[§§] Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. Since April 26, 2009, a total of 281 influenza-associated pediatric deaths associated with 2009 influenza A (H1N1) virus infection have been reported. Since August 30, 2009, a total of 272 influenza-associated pediatric deaths occurring during the 2009–10 influenza season have been reported. A total of 134 influenza-associated pediatric deaths occurring during the 2008-09 influenza season have been reported.

[¶¶] Of the five measles cases reported for the current week, one was imported, and four were indigenous.

[***] Data for meningococcal disease (all serogroups) are available in Table II.

[†††] CDC discontinued reporting of individual confirmed and probable cases of 2009 pandemic influenza A (H1N1) virus infections on July 24, 2009. CDC will report the total number of 2009 pandemic influenza A (H1N1) hospitalizations and deaths weekly on the CDC H1N1 influenza website (http://www.cdc.gov/h1n1flu). In addition, three cases of novel influenza A virus infections, unrelated to the 2009 pandemic influenza A (H1N1) virus, were reported to CDC during 2009.

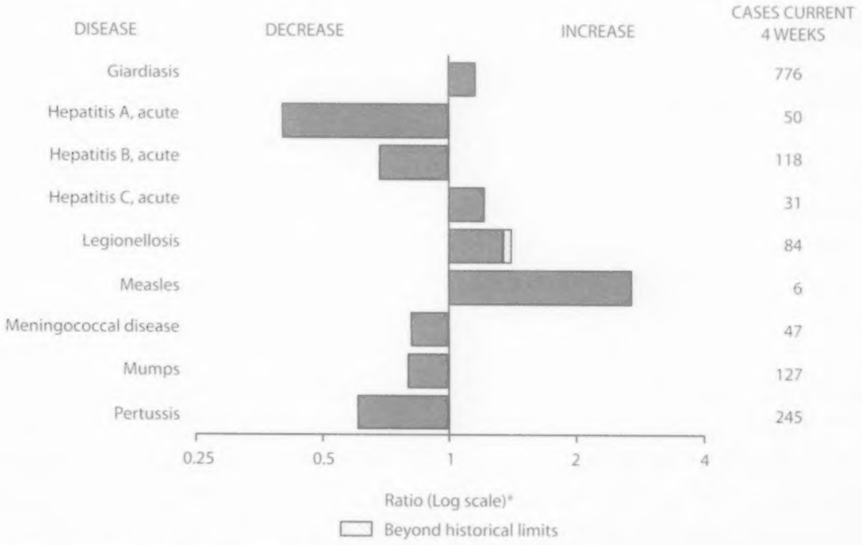
[§§§] In 2009, Q fever acute and chronic reporting categories were recognized as a result of revisions to the Q fever case definition. Prior to that time, case counts were not differentiated with respect to acute and chronic Q fever cases.

[¶¶¶] No rubella cases were reported for the current week.

[****] Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases.

[††††] There was one case of Viral Hemorrhagic Fever reported during week 12. The one case report was confirmed as Lassa fever. See Table II for Dengue Hemorrhagic Fever.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals April 17, 2010, with historical data



[*] Ratio of current 4-week total to mean of 15 4-week totals (from previous, comparable, and subsequent 4-week periods for the past 5 years). The point where the hatched area begins is based on the mean and two standard deviations of these 4-week totals.

Notifiable Disease Data Team and 122 Cities Mortality Data Team

Patsy A. Hall-Baker

Deborah A. Adams	Rosaline Dhara
Willie J. Anderson	Pearl C. Sharp
Jose Aponte	Michael S. Wodajo
Lenee Blanton	

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

Reporting area	*Chlamydia trachomatis* infection					Cryptosporidiosis				
	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009
		Med	Max				Med	Max		
United States	11,680	23,199	27,391	260,681	363,070	50	116	262	1,237	1,317
New England	587	704	1,398	8,440	11,719	—	6	25	58	110
Connecticut	—	210	736	859	3,173	—	0	21	21	40
Maine†	—	49	75	636	761	—	1	4	14	7
Massachusetts	465	368	767	5,501	5,958	—	1	15	—	34
New Hampshire	—	36	60	167	622	—	1	5	6	17
Rhode Island†	99	67	244	930	858	—	0	8	5	1
Vermont†	23	23	63	347	347	—	1	9	12	11
Mid. Atlantic	3,093	3,059	4,435	46,111	46,486	7	14	38	141	147
New Jersey	342	426	611	5,266	7,690	—	0	5	—	8
New York (Upstate)	897	607	2,415	9,219	8,626	4	3	16	27	40
New York City	1,293	1,184	2,289	19,153	17,519	—	1	5	10	24
Pennsylvania	561	817	1,020	12,473	12,651	3	9	19	104	75
E.N. Central	868	3,431	4,021	27,912	59,176	6	29	55	262	336
Illinois	—	978	1,428	146	17,585	—	3	8	38	33
Indiana	76	379	602	3,119	6,715	—	4	10	14	72
Michigan	683	880	1,379	14,354	14,326	1	6	11	77	64
Ohio	109	821	1,014	7,499	14,608	5	8	16	91	86
Wisconsin	—	376	480	2,794	5,942	—	8	24	42	81
W.N. Central	430	1,311	1,715	17,135	21,060	12	19	59	177	161
Iowa	23	174	252	2,449	2,986	1	3	13	38	39
Kansas	—	183	573	2,309	2,976	1	2	6	22	17
Minnesota	—	269	337	3,035	4,393	2	5	31	57	30
Missouri	362	504	638	7,527	7,743	4	3	12	33	33
Nebraska†	45	95	236	1,410	1,617	3	2	9	19	18
North Dakota	—	31	92	405	488	1	0	5	2	1
South Dakota	—	1	80	—	857	—	0	10	6	23
S. Atlantic	2,515	4,543	6,224	46,323	72,846	10	17	50	244	257
Delaware	100	87	180	1,258	1,367	—	0	2	1	—
District of Columbia	88	116	178	1,381	2,120	—	0	0	—	2
Florida	541	1,408	1,671	19,709	21,823	6	7	24	96	80
Georgia	12	626	1,322	692	12,466	1	5	31	100	106
Maryland†	396	454	1,031	5,676	6,246	1	0	5	8	10
North Carolina	—	746	1,291	—	12,483	—	0	8	11	27
South Carolina†	636	520	1,421	8,019	7,083	—	1	7	9	15
Virginia†	672	607	926	8,543	8,055	2	1	7	15	13
West Virginia	70	67	137	1,045	1,203	—	0	2	4	4
E.S. Central	738	1,705	2,264	21,898	27,284	2	4	10	53	39
Alabama†	3	450	629	5,418	7,701	—	1	5	15	13
Kentucky	353	260	642	4,302	3,438	2	2	4	20	9
Mississippi	—	449	640	4,813	7,206	—	0	3	4	4
Tennessee†	382	569	734	7,365	8,939	—	1	5	14	13
W.S. Central	492	2,939	5,780	31,412	47,431	5	8	39	74	55
Arkansas†	296	269	416	4,168	4,551	—	1	5	12	5
Louisiana	—	472	1,055	2,922	9,300	1	0	6	11	7
Oklahoma	196	222	2,713	4,554	2,148	—	2	9	10	10
Texas†	—	2,005	3,214	19,768	31,432	4	6	28	41	33
Mountain	945	1,399	2,089	16,900	20,162	6	10	25	112	97
Arizona	454	476	742	3,863	6,965	—	0	3	5	9
Colorado	—	375	689	5,208	3,272	4	2	10	33	24
Idaho†	—	67	185	713	1,147	1	2	7	21	9
Montana†	37	55	79	836	970	1	1	4	14	8
Nevada†	248	168	478	2,589	3,119	—	0	2	4	6
New Mexico†	136	168	257	1,570	2,202	—	2	8	17	28
Utah	70	111	162	1,635	1,908	—	1	4	13	4
Wyoming†	—	36	69	486	579	—	0	2	5	9
Pacific	2,012	3,443	5,291	44,550	56,906	2	13	27	116	115
Alaska	—	100	132	1,459	1,614	—	0	1	1	1
California	1,689	2,592	4,383	35,958	43,581	2	7	18	69	61
Hawaii	—	119	147	1,399	1,753	—	0	1	—	—
Oregon	—	189	468	1,367	3,149	—	3	10	28	44
Washington	323	377	501	4,367	6,809	—	1	13	18	9
American Samoa	—	0	0	—	—	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—
Guam	—	1	27	51	—	—	0	0	—	—
Puerto Rico	135	124	331	1,861	2,171	N	0	0	N	N
U.S. Virgin Islands	—	10	21	52	128	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

* Incidence data for reporting years 2009 and 2010 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly.

† Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

	Dengue Virus Infection									
	Dengue Fever					Dengue Hemorrhagic Fever†				
		Previous 52 weeks					Previous 52 weeks			
Reporting area	Current week	Med	Max	Cum 2010	Cum 2009	Current week	Med	Max	Cum 2010	Cum 2009
United States	—	0	5	19	NN	—	0	0	—	NN
New England	—	0	1	2	NN	—	0	0	—	NN
Connecticut	—	0	0	—	NN	—	0	0	—	NN
Maine§	—	0	1	2	NN	—	0	0	—	NN
Massachusetts	—	0	0	—	NN	—	0	0	—	NN
New Hampshire	—	0	0	—	NN	—	0	0	—	NN
Rhode Island§	—	0	0	—	NN	—	0	0	—	NN
Vermont§	—	0	0	—	NN	—	0	0	—	NN
Mid. Atlantic	—	0	3	12	NN	—	0	0	—	NN
New Jersey	—	0	0	—	NN	—	0	0	—	NN
New York (Upstate)	—	0	0	—	NN	—	0	0	—	NN
New York City	—	0	2	8	NN	—	0	0	—	NN
Pennsylvania	—	0	2	4	NN	—	0	0	—	NN
E.N. Central	—	0	1	1	NN	—	0	0	—	NN
Illinois	—	0	0	—	NN	—	0	0	—	NN
Indiana	—	0	0	—	NN	—	0	0	—	NN
Michigan	—	0	0	—	NN	—	0	0	—	NN
Ohio	—	0	1	1	NN	—	0	0	—	NN
Wisconsin	—	0	0	—	NN	—	0	0	—	NN
W.N. Central	—	0	0	—	NN	—	0	0	—	NN
Iowa	—	0	0	—	NN	—	0	0	—	NN
Kansas	—	0	0	—	NN	—	0	0	—	NN
Minnesota	—	0	0	—	NN	—	0	0	—	NN
Missouri	—	0	0	—	NN	—	0	0	—	NN
Nebraska§	—	0	0	—	NN	—	0	0	—	NN
North Dakota	—	0	0	—	NN	—	0	0	—	NN
South Dakota	—	0	0	—	NN	—	0	0	—	NN
S. Atlantic	—	0	1	1	NN	—	0	0	—	NN
Delaware	—	0	0	—	NN	—	0	0	—	NN
District of Columbia	—	0	0	—	NN	—	0	0	—	NN
Florida	—	0	0	—	NN	—	0	0	—	NN
Georgia	—	0	1	1	NN	—	0	0	—	NN
Maryland§	—	0	0	—	NN	—	0	0	—	NN
North Carolina	—	0	0	—	NN	—	0	0	—	NN
South Carolina§	—	0	0	—	NN	—	0	0	—	NN
Virginia§	—	0	0	—	NN	—	0	0	—	NN
West Virginia	—	0	0	—	NN	—	0	0	—	NN
E.S. Central	—	0	0	—	NN	—	0	0	—	NN
Alabama§	—	0	0	—	NN	—	0	0	—	NN
Kentucky	—	0	0	—	NN	—	0	0	—	NN
Mississippi	—	0	0	—	NN	—	0	0	—	NN
Tennessee§	—	0	0	—	NN	—	0	0	—	NN
W.S. Central	—	0	0	—	NN	—	0	0	—	NN
Arkansas§	—	0	0	—	NN	—	0	0	—	NN
Louisiana	—	0	0	—	NN	—	0	0	—	NN
Oklahoma	—	0	0	—	NN	—	0	0	—	NN
Texas§	—	0	0	—	NN	—	0	0	—	NN
Mountain	—	0	1	1	NN	—	0	0	—	NN
Arizona	—	0	0	—	NN	—	0	0	—	NN
Colorado	—	0	0	—	NN	—	0	0	—	NN
Idaho§	—	0	0	—	NN	—	0	0	—	NN
Montana§	—	0	0	—	NN	—	0	0	—	NN
Nevada§	—	0	0	—	NN	—	0	0	—	NN
New Mexico§	—	0	1	1	NN	—	0	0	—	NN
Utah	—	0	0	—	NN	—	0	0	—	NN
Wyoming§	—	0	0	—	NN	—	0	0	—	NN
Pacific	—	0	2	2	NN	—	0	0	—	NN
Alaska	—	0	0	—	NN	—	0	0	—	NN
California	—	0	0	—	NN	—	0	0	—	NN
Hawaii	—	0	0	—	NN	—	0	0	—	NN
Oregon	—	0	0	—	NN	—	0	0	—	NN
Washington	—	0	2	2	NN	—	0	0	—	NN
American Samoa	—	0	0	—	NN	—	0	0	—	NN
C.N.M.I.	—	—	—	—	NN	—	—	—	—	NN
Guam	—	0	0	—	NN	—	0	0	—	NN
Puerto Rico	—	0	0	—	NN	—	0	0	—	NN
U.S. Virgin Islands	—	0	0	—	NN	—	0	0	—	NN

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U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

* Incidence data for reporting years 2009 and 2010 are provisional.

† DHF includes cases that meet criteria for dengue shock syndrome (DSS), a more severe form of DHF.

§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

	Ehrlichiosis/Anaplasmosis†														
	Ehrlichia chaffeensis					*Anaplasma phagocytophilum*					Undetermined				
	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009
Reporting area		Med	Max				Med	Max				Med	Max		
United States	1	11	57	28	51	1	13	66	9	27	—	2	13	3	5
New England	—	0	4	1	3	—	2	21	4	12	—	0	2	—	—
Connecticut	—	0	0	—	—	—	0	11	—	—	—	0	1	—	—
Maine§	—	0	1	1	—	—	0	3	2	—	—	0	0	—	—
Massachusetts	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
New Hampshire	—	0	1	—	—	—	0	3	—	1	—	0	1	—	—
Rhode Island§	—	0	4	—	3	—	0	20	2	11	—	0	1	—	—
Vermont§	—	0	1	—	—	—	0	0	—	—	—	0	0	—	—
Mid. Atlantic	1	1	15	8	9	—	3	23	1	3	—	0	2	1	—
New Jersey	—	0	0	—	1	—	0	0	—	—	—	0	0	—	—
New York (Upstate)	1	1	15	4	3	—	3	22	1	2	—	0	1	1	—
New York City	—	0	3	3	4	—	0	1	—	1	—	0	2	—	—
Pennsylvania	—	0	1	1	1	—	0	0	—	—	—	0	0	—	—
E.N. Central	—	1	8	—	4	—	3	22	1	5	—	1	9	—	1
Illinois	—	0	4	—	—	—	0	1	—	—	—	0	1	—	—
Indiana	—	0	0	—	—	—	0	0	—	—	—	0	8	—	—
Michigan	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Ohio	—	0	2	—	2	—	0	1	—	—	—	0	1	—	—
Wisconsin	—	0	5	—	2	—	3	22	1	5	—	0	3	—	1
W.N. Central	—	2	23	1	3	—	0	44	—	—	—	0	5	1	—
Iowa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Kansas	—	0	2	—	—	—	0	0	—	—	—	0	0	—	—
Minnesota	—	0	3	—	2	—	0	44	—	—	—	0	5	—	—
Missouri	—	1	22	1	1	—	0	2	—	—	—	0	4	1	—
Nebraska§	—	0	1	—	—	—	0	1	—	—	—	0	0	—	—
North Dakota	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
South Dakota	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
S. Atlantic	—	4	19	16	26	1	0	2	3	6	—	0	2	1	—
Delaware	—	0	2	1	2	—	0	1	—	—	—	0	0	—	—
District of Columbia	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Florida	—	0	1	1	2	—	0	1	—	—	—	0	0	—	—
Georgia	—	0	2	3	6	—	0	1	1	1	—	0	0	—	—
Maryland§	—	1	4	4	5	1	0	1	1	1	—	0	1	—	—
North Carolina	—	0	4	7	9	—	0	1	1	4	—	0	0	—	—
South Carolina§	—	0	1	—	1	—	0	0	—	—	—	0	0	—	—
Virginia§	—	1	13	—	1	—	0	1	—	—	—	0	2	1	—
West Virginia	—	0	1	—	—	—	0	0	—	—	—	0	0	—	—
E.S. Central	—	1	11	1	3	—	0	1	—	1	—	0	5	—	4
Alabama§	—	0	3	—	—	—	0	1	—	—	—	0	0	—	—
Kentucky	—	0	2	—	—	—	0	0	—	—	—	0	1	—	—
Mississippi	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Tennessee§	—	1	10	1	3	—	0	1	—	1	—	0	5	—	4
W.S. Central	—	0	9	1	1	—	0	1	—	—	—	0	0	—	—
Arkansas§	—	0	5	—	—	—	0	0	—	—	—	0	0	—	—
Louisiana	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Oklahoma	—	0	8	—	1	—	0	1	—	—	—	0	0	—	—
Texas§	—	0	2	1	—	—	0	1	—	—	—	0	0	—	—
Mountain	—	0	0	—	—	—	0	0	—	—	—	0	1	—	—
Arizona	—	0	0	—	—	—	0	0	—	—	—	0	1	—	—
Colorado	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Idaho§	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Montana§	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Nevada§	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
New Mexico§	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Utah	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Wyoming§	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Pacific	—	0	0	—	2	—	0	0	—	—	—	0	0	—	—
Alaska	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
California	—	0	0	—	2	—	0	0	—	—	—	0	0	—	—
Hawaii	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Oregon	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Washington	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2009 and 2010 are provisional.
† Cumulative total *E. ewingii* cases reported as of this week = 0.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

Reporting area	Giardiasis					Gonorrhea					*Haemophilus influenzae*, invasive[†] All ages, all serotypes				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009
United States	149	328	607	4,006	4,470	2,424	5,490	6,907	58,128	87,061	38	55	145	807	1,043
New England	5	27	66	184	373	31	90	188	956	1,423	—	3	19	14	52
Connecticut	—	6	15	51	73	—	45	122	245	613	—	0	13	4	10
Maine[§]	3	4	13	54	58	—	3	11	61	48	—	0	2	1	8
Massachusetts	—	11	36	—	156	28	37	81	524	618	—	1	8	—	27
New Hampshire	—	3	12	26	29	—	2	6	36	32	—	0	2	5	4
Rhode Island[§]	—	1	6	10	16	3	6	19	81	97	—	0	2	3	1
Vermont[§]	2	4	14	43	41	—	1	5	9	15	—	0	1	1	2
Mid. Atlantic	28	59	103	634	858	552	622	915	9,209	9,066	10	12	27	195	169
New Jersey	—	0	10	—	129	73	91	134	1,212	1,462	—	2	7	20	23
New York (Upstate)	13	24	81	280	299	130	97	397	1,447	1,575	7	3	19	56	42
New York City	8	15	28	178	242	230	217	417	3,618	3,231	—	2	11	38	29
Pennsylvania	7	14	37	176	188	119	197	275	2,932	2,798	3	4	10	81	75
E.N. Central	17	43	75	576	672	162	1,065	1,438	7,716	18,492	3	9	29	109	252
Illinois	—	11	21	113	146	—	315	417	48	5,497	—	3	11	30	48
Indiana	N	0	7	N	N	15	105	209	946	2,200	—	1	5	19	27
Michigan	4	13	25	178	178	105	250	503	4,014	4,775	—	0	4	10	9
Ohio	13	16	28	236	221	42	289	362	2,135	4,492	3	2	6	37	34
Wisconsin	—	7	17	49	127	—	88	146	573	1,528	—	2	21	13	134
W.N. Central	13	25	156	351	382	112	272	361	3,423	4,436	7	2	21	55	54
Iowa	1	6	15	64	69	6	30	46	367	491	—	0	0	—	—
Kansas	—	3	14	56	41	—	40	85	415	755	1	0	2	7	9
Minnesota	—	0	135	61	73	—	42	64	472	680	4	0	17	16	11
Missouri	7	9	27	93	134	93	123	172	1,834	1,969	2	1	6	24	21
Nebraska[§]	2	4	9	65	40	13	23	54	311	409	—	0	3	3	10
North Dakota	3	0	8	6	3	—	2	14	24	21	—	0	2	5	3
South Dakota	—	0	5	6	22	—	0	14	—	111	—	0	0	—	—
S. Atlantic	47	73	107	1,037	1,033	738	1,361	1,798	12,914	21,287	12	13	31	199	268
Delaware	—	1	3	9	8	27	18	37	288	227	—	0	1	2	1
District of Columbia	—	0	2	6	13	44	45	88	544	846	—	0	1	—	1
Florida	23	37	59	490	538	171	396	476	5,289	6,194	9	4	10	64	90
Georgia	13	11	67	280	243	—	204	494	330	4,122	1	3	9	52	61
Maryland[§]	7	5	12	83	74	118	125	241	1,596	1,678	1	1	6	11	32
North Carolina	N	0	0	N	N	—	243	386	—	4,114	—	0	17	17	20
South Carolina[§]	—	2	7	28	32	195	161	412	2,339	2,073	—	1	7	27	23
Virginia[§]	4	9	36	131	112	175	159	272	2,392	1,863	—	1	5	20	28
West Virginia	—	1	5	10	13	8	8	18	136	170	1	0	5	6	12
E.S. Central	2	6	22	67	109	212	470	649	5,945	7,822	—	3	12	46	59
Alabama[§]	—	4	13	33	54	1	131	187	1,583	2,212	—	0	4	5	16
Kentucky	N	0	0	N	N	87	73	156	1,106	991	—	0	5	4	6
Mississippi	N	0	0	N	N	—	137	198	1,356	2,198	—	0	2	4	3
Tennessee[§]	2	3	18	34	55	124	147	206	1,900	2,421	—	2	10	33	34
W.S. Central	4	7	19	95	93	139	876	1,553	8,328	13,613	2	2	10	46	43
Arkansas[§]	2	3	9	32	32	85	86	139	1,168	1,348	1	0	3	7	8
Louisiana	1	1	7	35	43	—	151	343	910	2,994	—	0	2	9	8
Oklahoma	1	3	10	28	18	54	64	613	1,201	744	1	1	7	27	25
Texas[§]	N	0	0	N	N	—	561	951	5,049	8,527	—	0	2	3	2
Mountain	12	29	64	406	343	123	162	256	1,878	2,546	3	5	14	111	96
Arizona	—	4	7	42	53	54	58	108	483	763	—	2	10	43	31
Colorado	8	10	26	199	102	—	40	99	622	772	2	1	6	28	27
Idaho[§]	3	4	10	55	35	—	2	8	22	32	1	0	2	5	2
Montana[§]	1	2	11	32	28	1	1	6	36	27	—	0	1	—	1
Nevada[§]	—	2	11	15	16	43	26	94	446	555	—	0	2	4	9
New Mexico[§]	—	1	8	16	29	19	20	36	194	285	—	1	5	15	14
Utah	—	5	13	33	63	6	6	13	67	97	—	1	4	11	12
Wyoming[§]	—	1	5	14	17	—	1	7	8	15	—	0	2	5	—
Pacific	21	53	163	656	607	355	527	636	7,759	8,376	1	2	9	32	50
Alaska	—	2	7	26	19	—	21	36	358	255	—	0	3	8	3
California	16	33	60	413	441	313	437	542	6,576	6,826	—	0	4	—	12
Hawaii	—	0	2	—	6	—	12	24	175	183	—	0	3	—	16
Oregon	5	9	17	135	93	—	17	43	106	348	1	1	4	22	16
Washington	—	8	106	82	48	42	39	64	544	764	—	0	4	2	3
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	1	1	—	—	0	3	4	—	—	0	0	—	—
Puerto Rico	1	2	10	5	45	7	4	24	74	57	—	0	1	1	—
U.S. Virgin Islands	—	0	0	—	—	—	2	7	8	38	N	0	0	N	N

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U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

[*] Incidence data for reporting years 2009 and 2010 are provisional.

[†] Data for *H. influenzae* (age <5 yrs for serotype b, nonserotype b, and unknown serotype) are available in Table I.

[§] Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

	Hepatitis (viral, acute), by type														
	A					B					C				
Reporting area	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009
United States	10	35	61	342	560	24	56	187	674	1,079	7	16	43	185	258
New England	—	2	5	13	34	1	1	4	11	16	—	1	5	6	17
Connecticut	—	0	2	8	7	—	0	3	3	4	—	1	4	6	13
Maine†	—	0	1	1	1	1	0	2	5	3	—	0	1	—	—
Massachusetts	—	1	4	—	19	—	0	2	—	8	—	0	1	—	3
New Hampshire	—	0	1	—	3	—	0	2	2	1	—	0	1	—	—
Rhode Island†	—	0	4	4	3	—	0	0	—	—	—	0	0	—	—
Vermont†	—	0	1	—	1	—	0	1	1	—	—	0	0	—	1
Mid. Atlantic	1	4	10	50	75	3	5	16	66	121	1	2	7	19	27
New Jersey	—	0	5	3	19	—	1	5	9	35	—	0	1	—	2
New York (Upstate)	1	1	3	15	14	—	1	5	13	18	1	1	4	12	10
New York City	—	2	5	19	19	—	1	5	24	25	—	0	0	—	—
Pennsylvania	—	1	6	13	23	3	1	6	20	43	—	0	4	7	15
E.N. Central	1	4	19	43	89	2	7	15	96	165	—	4	12	34	59
Illinois	—	2	13	10	33	—	1	7	16	34	—	0	1	—	3
Indiana	—	0	4	2	7	—	1	5	15	24	—	0	4	4	2
Michigan	1	1	4	16	25	1	2	6	33	43	—	3	8	28	39
Ohio	—	0	4	10	17	1	1	4	32	45	—	0	3	2	13
Wisconsin	—	0	2	5	7	—	0	3	—	19	—	0	2	—	2
W.N. Central	—	2	7	13	27	—	2	14	45	38	—	0	10	8	5
Iowa	—	0	3	4	6	—	0	3	6	10	—	0	4	—	3
Kansas	—	0	2	4	2	—	0	2	2	2	—	0	0	—	1
Minnesota	—	0	7	1	6	—	0	13	2	6	—	0	9	3	—
Missouri	—	0	2	3	6	—	1	5	27	11	—	0	2	4	—
Nebraska†	—	0	3	1	6	—	0	2	8	8	—	0	1	—	1
North Dakota	—	0	1	—	—	—	0	0	—	—	—	0	1	—	—
South Dakota	—	0	1	—	1	—	0	1	—	1	—	0	1	1	—
S. Atlantic	2	8	13	78	137	8	15	35	188	337	4	3	12	44	56
Delaware	—	0	1	3	1	U	1	2	U	U	U	0	0	U	U
District of Columbia	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Florida	2	3	9	31	69	5	5	13	77	100	3	1	4	17	7
Georgia	—	1	4	10	20	—	3	7	44	56	—	0	2	2	12
Maryland†	—	0	3	3	14	—	1	6	20	40	—	1	3	7	14
North Carolina	—	0	7	8	12	—	0	12	2	90	—	0	10	9	8
South Carolina†	—	1	4	14	12	—	1	4	9	6	—	0	1	—	—
Virginia†	—	1	3	8	9	3	2	13	28	21	—	0	2	4	5
West Virginia	—	0	2	1	—	—	0	19	8	15	1	0	3	5	10
E.S. Central	—	1	3	11	12	2	6	13	78	114	1	2	5	28	39
Alabama†	—	0	2	3	1	—	1	5	19	32	—	0	2	1	5
Kentucky	—	0	2	5	1	1	2	6	27	25	—	1	5	22	21
Mississippi	—	0	1	—	6	—	0	3	5	7	—	0	0	—	—
Tennessee†	—	0	2	3	4	1	2	6	27	50	1	0	3	5	13
W.S. Central	4	3	18	40	52	4	9	92	80	156	—	1	6	14	14
Arkansas†	—	0	2	—	4	—	1	4	3	16	—	0	1	—	1
Louisiana	—	0	1	3	2	—	0	3	13	18	—	0	1	1	3
Oklahoma	—	0	3	—	1	1	2	8	13	31	—	0	4	6	1
Texas†	4	3	18	37	45	3	6	86	51	91	—	0	4	7	9
Mountain	—	3	8	39	40	—	2	6	25	48	1	1	4	12	20
Arizona	—	1	5	23	15	—	0	3	8	21	—	0	0	—	—
Colorado	—	1	5	6	10	—	0	2	1	11	1	0	3	2	12
Idaho†	—	0	1	2	—	—	0	2	2	1	—	0	2	4	1
Montana†	—	0	1	2	2	—	0	1	—	—	—	0	0	—	—
Nevada†	—	0	2	4	6	—	0	3	10	7	—	0	1	1	1
New Mexico†	—	0	1	2	4	—	0	1	2	4	—	0	1	3	4
Utah	—	0	2	—	3	—	0	1	2	4	—	0	1	2	2
Wyoming†	—	0	1	—	—	—	0	2	—	—	—	0	0	—	—
Pacific	2	5	16	55	94	4	6	29	85	84	—	1	7	20	21
Alaska	—	0	0	—	3	—	0	1	1	—	—	0	2	—	—
California	2	4	15	47	71	3	4	17	61	63	—	1	4	5	9
Hawaii	—	0	1	—	5	—	0	1	—	2	—	0	0	—	—
Oregon	—	0	2	4	5	1	1	4	14	11	—	0	3	9	6
Washington	—	0	4	4	10	—	0	12	9	8	—	0	7	6	6
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	6	7	—	—	1	6	20	—	—	1	4	12	—
Puerto Rico	—	0	2	2	11	—	0	5	4	8	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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* Incidence data for reporting years 2009 and 2010 are provisional.

† Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

Reporting area	Legionellosis					Lyme disease					Malaria				
	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009
		Med	Max				Med	Max				Med	Max		
United States	16	57	167	450	480	88	445	2,433	2,052	3,265	9	22	77	268	275
New England	—	2	18	8	23	4	137	851	160	1,031	—	1	4	1	10
Connecticut	—	0	5	3	5	—	48	295	—	480	—	0	3	—	—
Maine†	—	0	3	—	—	4	12	76	63	32	—	0	1	—	—
Massachusetts	—	1	9	—	16	—	42	397	—	366	—	0	3	—	8
New Hampshire	—	0	2	1	—	—	18	93	74	128	—	0	1	1	—
Rhode Island†	—	0	4	3	1	—	1	29	4	2	—	0	1	—	1
Vermont†	—	0	1	1	1	—	5	42	19	23	—	0	1	—	1
Mid. Atlantic	2	16	72	98	121	52	209	1,143	1,249	1,347	2	7	13	70	57
New Jersey	—	1	13	—	20	—	39	389	253	442	—	0	1	—	—
New York (Upstate)	1	5	29	33	39	32	52	430	280	325	2	1	4	19	15
New York City	—	3	19	24	12	—	5	32	2	54	—	4	12	37	35
Pennsylvania	1	6	25	41	50	20	107	652	714	526	—	1	4	14	7
E.N. Central	5	10	39	83	101	—	24	223	54	150	—	2	11	21	38
Illinois	—	1	10	7	11	—	1	11	—	2	—	1	5	7	15
Indiana	—	1	5	6	14	—	1	7	7	6	—	0	4	2	6
Michigan	1	3	13	18	17	—	1	9	1	1	—	0	3	3	5
Ohio	4	5	17	50	44	—	1	5	5	3	—	0	6	9	10
Wisconsin	—	1	5	2	15	—	20	205	41	138	—	0	1	—	2
W.N. Central	1	2	14	15	14	—	4	251	9	37	1	1	8	17	10
Iowa	—	0	2	—	6	—	0	14	—	6	—	0	1	3	4
Kansas	—	0	1	1	3	—	0	2	1	4	—	0	1	3	1
Minnesota	—	0	13	4	—	—	0	251	6	25	—	0	8	3	1
Missouri	—	1	5	6	2	—	0	1	1	1	—	0	1	3	3
Nebraska†	—	0	2	2	2	—	0	3	1	—	1	0	2	5	—
North Dakota	1	0	1	2	1	—	0	0	—	—	—	0	1	—	—
South Dakota	—	0	1	—	—	—	0	0	—	1	—	0	1	—	1
S. Atlantic	7	11	22	103	105	25	68	254	497	647	3	6	16	79	108
Delaware	—	0	5	3	—	4	13	65	135	132	—	0	1	1	1
District of Columbia	—	0	2	1	2	—	0	5	1	2	—	0	1	3	5
Florida	5	4	10	46	43	1	2	11	20	7	1	2	7	40	29
Georgia	—	1	4	13	18	—	0	5	2	14	—	1	5	2	19
Maryland†	2	3	12	23	21	12	29	135	211	363	2	1	13	15	29
North Carolina	—	0	5	1	14	—	0	14	12	15	—	0	3	5	14
South Carolina†	—	0	2	1	1	—	1	3	7	5	—	0	1	1	1
Virginia†	—	1	6	14	6	8	11	79	98	92	—	1	5	12	9
West Virginia	—	0	2	1	—	—	0	33	11	17	—	0	2	—	1
E.S. Central	—	2	12	21	20	—	1	4	7	5	—	0	3	4	10
Alabama†	—	0	2	3	3	—	0	1	—	—	—	0	3	1	2
Kentucky	—	1	3	6	9	—	0	1	1	1	—	0	3	2	1
Mississippi	—	0	2	2	—	—	0	0	—	—	—	0	1	—	—
Tennessee†	—	1	9	10	8	—	1	4	6	4	—	0	1	1	7
W.S. Central	—	2	9	14	22	—	4	43	5	11	—	1	30	36	7
Arkansas†	—	0	1	1	1	—	0	0	—	—	—	0	1	1	—
Louisiana	—	0	2	1	1	—	0	0	—	—	—	0	1	—	1
Oklahoma	—	0	2	—	1	—	0	0	—	—	—	0	1	2	—
Texas†	—	1	9	12	19	—	4	43	5	11	—	1	30	33	6
Mountain	—	3	8	26	28	—	1	4	4	7	2	0	6	11	4
Arizona	—	1	4	11	8	—	0	1	—	—	1	0	2	5	1
Colorado	—	0	4	2	3	—	0	1	1	—	1	0	3	1	1
Idaho†	—	0	2	—	1	—	0	3	1	2	—	0	1	—	—
Montana†	—	0	1	1	4	—	0	1	—	1	—	0	3	—	—
Nevada†	—	0	2	8	5	—	0	2	1	2	—	0	1	2	—
New Mexico†	—	0	2	1	—	—	0	1	—	—	—	0	0	—	—
Utah	—	0	4	3	6	—	0	1	1	2	—	0	1	3	2
Wyoming†	—	0	2	—	1	—	0	1	—	—	—	0	0	—	—
Pacific	1	4	20	82	46	7	4	10	67	30	1	2	20	29	31
Alaska	—	0	0	—	1	—	0	1	1	2	—	0	1	1	1
California	1	3	19	74	38	5	2	9	44	20	1	2	13	20	21
Hawaii	—	0	0	—	1	N	0	0	N	N	—	0	0	—	1
Oregon	—	0	3	1	3	2	1	4	22	8	—	0	1	2	5
Washington	—	0	5	7	3	—	0	3	—	—	—	0	6	6	3
American Samoa	N	0	0	N	N	N	0	0	N	N	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	1	—	—	N	0	0	N	N	—	0	2	1	1
U.S. Virgin Islands	—	0	0	—	—	N	0	0	N	N	—	0	0	—	—

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TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

Reporting area	Meningococcal disease, invasive[†] All groups					Pertussis					Rabies, animal				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009
United States	9	16	40	238	334	49	269	1,533	2,275	3,667	24	60	139	583	1,004
New England	—	0	2	2	14	—	10	25	12	181	1	6	24	61	85
Connecticut	—	0	2	—	2	—	1	4	—	7	—	1	22	24	35
Maine[§]	—	0	1	—	1	—	1	10	4	28	—	1	4	18	14
Massachusetts	—	0	1	—	8	—	4	17	—	118	—	0	0	—	—
New Hampshire	—	0	1	—	1	—	1	7	2	17	—	0	3	3	8
Rhode Island[§]	—	0	1	—	1	—	0	8	4	5	—	0	5	1	10
Vermont[§]	—	0	1	2	1	—	0	1	2	6	1	1	5	15	18
Mid. Atlantic	—	2	6	24	32	11	20	40	165	297	4	11	23	163	186
New Jersey	—	0	2	7	3	—	2	8	18	72	—	0	0	—	—
New York (Upstate)	—	0	3	3	7	6	5	27	73	51	4	8	22	120	88
New York City	—	0	2	6	5	3	0	11	3	25	—	0	11	43	2
Pennsylvania	—	1	3	8	17	2	9	29	71	149	—	0	10	—	96
E.N. Central	2	2	7	32	70	20	53	100	593	783	3	2	19	9	12
Illinois	—	0	4	7	16	—	11	29	72	195	2	1	9	3	3
Indiana	—	0	3	7	13	—	6	15	29	98	—	0	7	—	3
Michigan	—	0	5	4	11	2	16	41	187	166	—	1	6	3	6
Ohio	2	1	2	11	18	18	20	49	300	282	1	0	5	3	—
Wisconsin	—	0	1	3	12	—	1	12	5	42	N	0	0	N	N
W.N. Central	—	1	6	16	24	4	27	599	175	736	9	6	18	54	85
Iowa	—	0	2	3	1	—	3	10	24	47	—	0	3	—	7
Kansas	—	0	2	1	6	—	4	12	34	66	1	1	4	20	34
Minnesota	—	0	2	2	5	—	0	585	—	164	—	0	11	9	7
Missouri	—	0	3	8	8	—	13	35	91	392	3	1	5	7	6
Nebraska[§]	—	0	1	2	3	4	2	9	23	59	2	1	6	15	19
North Dakota	—	0	1	—	—	—	0	12	—	2	3	0	7	3	3
South Dakota	—	0	1	—	1	—	0	6	3	6	—	0	4	—	9
S. Atlantic	3	3	10	55	59	5	26	66	239	475	4	22	103	229	491
Delaware	—	0	1	1	1	—	0	2	—	4	—	0	0	—	—
District of Columbia	—	0	0	—	—	—	0	1	1	3	—	0	0	—	—
Florida	2	1	5	28	27	2	6	29	52	121	—	0	20	41	156
Georgia	—	0	2	4	8	—	4	10	58	100	—	0	72	—	88
Maryland[§]	—	0	1	2	1	1	3	8	37	33	2	8	15	92	86
North Carolina	—	0	10	5	9	—	0	21	—	125	N	0	4	N	N
South Carolina[§]	—	0	1	4	5	—	4	18	59	46	—	0	0	—	—
Virginia[§]	1	0	2	10	6	2	3	15	26	40	—	10	26	76	136
West Virginia	—	0	2	1	2	—	0	6	6	3	2	2	6	20	25
E.S. Central	—	0	4	10	14	1	14	30	206	195	—	1	4	3	48
Alabama[§]	—	0	2	1	3	—	5	19	55	49	—	0	1	3	—
Kentucky	—	0	2	4	2	—	3	15	73	82	—	0	2	—	20
Mississippi	—	0	1	2	2	—	1	6	14	22	—	0	1	—	—
Tennessee[§]	—	0	2	3	7	1	4	10	64	42	—	0	3	—	28
W.S. Central	1	1	9	31	29	1	68	711	551	422	—	0	13	10	15
Arkansas[§]	—	0	2	3	5	1	5	30	30	54	—	0	10	6	11
Louisiana	—	0	3	5	9	—	0	8	8	34	—	0	0	—	—
Oklahoma	—	0	7	12	2	—	0	32	3	9	—	0	13	4	4
Texas[§]	1	1	7	11	13	—	61	681	510	325	—	0	1	—	—
Mountain	—	1	4	16	30	4	17	41	207	320	—	1	8	13	32
Arizona	—	0	2	5	6	1	5	12	70	58	N	0	5	N	N
Colorado	—	0	3	4	10	1	4	13	31	77	—	0	0	—	—
Idaho[§]	—	0	1	1	5	2	1	19	47	28	—	0	1	1	—
Montana[§]	—	0	2	1	3	—	1	6	5	9	—	0	4	—	10
Nevada[§]	—	0	1	2	3	—	0	6	1	6	—	0	1	—	—
New Mexico[§]	—	0	1	2	1	—	1	6	26	29	—	0	3	3	12
Utah	—	0	1	1	1	—	3	11	26	105	—	0	2	—	—
Wyoming[§]	—	0	2	—	1	—	0	5	1	8	—	0	3	9	10
Pacific	3	3	19	52	62	3	21	46	127	258	3	4	12	41	50
Alaska	—	0	2	—	2	—	0	4	5	24	—	0	2	8	14
California	2	2	12	40	36	—	11	25	16	109	3	3	11	29	36
Hawaii	—	0	1	—	1	—	0	3	—	9	—	0	0	—	—
Oregon	1	0	5	8	17	3	4	12	75	61	—	0	2	4	—
Washington	—	0	6	4	6	—	4	39	31	55	—	0	0	—	—
American Samoa	—	0	0	—	—	—	0	0	—	—	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	1	—	—	—	0	0	—	1	—	1	3	16	13
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	N	0	0	N	N

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U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

[*] Incidence data for reporting years 2009 and 2010 are provisional.

[†] Data for meningococcal disease, invasive caused by serogroups A, C, Y, and W-135; serogroup B; other serogroup; and unknown serogroup are available in Table I.

[§] Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

	Salmonellosis					Shiga toxin-producing *E. coli* (STEC)†					Shigellosis				
	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009
Reporting area		Med	Max				Med	Max				Med	Max		
United States	288	913	1,465	6,528	9,332	29	84	190	475	830	117	279	502	3,097	4,238
New England	1	30	91	154	821	—	3	30	15	94	—	4	27	20	93
Connecticut	—	0	80	80	429	—	0	6	6	67	—	0	12	12	43
Maine§	—	2	7	19	28	—	0	3	1	—	—	0	2	3	2
Massachusetts	—	19	47	—	241	—	2	7	—	14	—	2	27	—	39
New Hampshire	—	3	44	27	82	—	1	3	7	10	—	0	4	3	1
Rhode Island§	—	1	12	17	28	—	0	26	—	—	—	0	7	1	5
Vermont§	1	1	5	11	13	—	0	3	1	3	—	0	1	1	3
Mid. Atlantic	47	98	207	787	1,040	6	7	22	51	94	14	42	89	447	863
New Jersey	—	16	47	63	199	—	1	5	1	26	—	5	23	54	268
New York (Upstate)	22	23	77	206	234	1	3	12	20	25	2	4	19	46	47
New York City	4	21	48	213	248	—	1	4	7	24	3	8	16	77	139
Pennsylvania	21	28	66	305	359	5	2	8	23	19	9	25	63	270	409
E.N. Central	30	91	159	713	1,261	5	13	36	59	153	5	33	225	563	958
Illinois	—	24	52	237	360	—	3	6	9	51	—	10	221	435	202
Indiana	—	9	24	35	101	—	1	9	2	19	—	1	5	1	27
Michigan	4	16	34	153	251	1	3	8	25	23	—	3	10	43	93
Ohio	26	24	52	254	320	4	2	11	17	22	5	10	46	72	501
Wisconsin	—	10	30	34	229	—	3	21	6	38	—	5	22	12	135
W.N. Central	23	44	86	420	659	4	11	39	71	82	44	37	87	728	137
Iowa	2	6	16	44	93	—	2	14	10	21	—	0	5	12	33
Kansas	—	6	22	69	75	—	1	5	8	6	2	3	13	54	48
Minnesota	4	11	31	112	150	2	2	17	20	23	—	1	6	14	16
Missouri	10	13	30	139	100	2	2	10	23	19	42	29	75	643	30
Nebraska§	5	4	12	41	152	—	1	6	9	11	—	0	3	5	8
North Dakota	2	0	21	8	9	—	0	3	—	—	—	0	2	—	1
South Dakota	—	0	9	7	80	—	0	12	1	2	—	0	1	—	1
S. Atlantic	82	282	453	1,994	2,209	9	12	23	108	150	23	41	78	441	621
Delaware	—	3	9	18	8	—	0	2	—	3	—	3	10	26	5
District of Columbia	—	0	3	12	17	—	0	0	—	1	—	0	2	5	6
Florida	57	133	278	972	905	7	3	7	50	41	14	10	18	171	127
Georgia	9	45	98	294	359	—	1	4	11	14	4	13	29	151	153
Maryland§	8	15	32	162	172	1	2	6	15	20	3	4	17	24	114
North Carolina	—	11	90	223	391	—	0	8	4	42	—	2	27	15	104
South Carolina§	3	17	65	109	148	—	0	3	2	5	—	2	6	23	52
Virginia§	4	20	68	159	170	1	3	12	25	18	2	3	15	26	55
West Virginia	1	4	23	45	39	—	0	5	1	6	—	0	2	—	5
E.S. Central	4	52	113	340	514	1	4	10	32	46	2	12	46	112	231
Alabama§	—	14	39	111	163	—	1	4	11	8	—	2	10	11	58
Kentucky	2	7	18	66	103	—	1	4	2	12	2	3	25	47	33
Mississippi	—	14	45	50	112	—	0	1	3	4	—	1	4	7	9
Tennessee§	2	14	33	113	136	1	1	8	16	22	—	5	16	47	131
W.S. Central	30	105	497	600	831	—	5	41	26	48	19	49	158	440	728
Arkansas§	5	10	25	54	94	—	1	4	5	8	—	5	15	11	68
Louisiana	3	9	43	139	102	—	0	1	4	—	—	1	7	21	59
Oklahoma	4	11	30	64	105	—	0	6	1	4	3	6	19	77	37
Texas§	18	59	478	343	530	—	4	41	16	36	16	35	142	331	564
Mountain	15	51	133	506	687	—	8	26	49	88	3	16	48	140	300
Arizona	5	19	50	178	248	—	1	4	9	8	2	11	42	79	210
Colorado	9	11	33	144	148	—	2	11	8	52	1	2	6	24	26
Idaho§	1	3	10	33	40	—	1	7	10	7	—	0	1	3	—
Montana§	—	2	7	26	35	—	0	7	8	2	—	0	4	3	7
Nevada§	—	4	13	35	63	—	0	4	2	3	—	1	7	5	25
New Mexico§	—	5	26	50	59	—	1	3	6	9	—	1	8	22	25
Utah	—	5	14	26	76	—	1	11	6	6	—	0	4	4	7
Wyoming§	—	1	9	14	18	—	0	2	—	1	—	0	1	—	—
Pacific	56	124	370	1,014	1,310	4	8	84	64	75	7	21	74	206	307
Alaska	—	1	7	21	15	—	0	0	—	—	—	0	2	—	1
California	47	93	225	785	1,018	4	4	34	42	54	6	16	51	178	246
Hawaii	—	5	61	—	65	—	0	2	—	3	—	0	4	—	6
Oregon	9	8	19	105	105	—	1	11	8	5	1	1	4	16	18
Washington	—	12	133	103	107	—	2	48	14	13	—	2	19	12	36
American Samoa	—	1	1	1	—	—	0	0	—	—	—	0	0	—	3
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	9	39	55	139	—	0	0	—	—	—	0	2	—	3
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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† Includes *E. coli* O157:H7; Shiga toxin-positive, serogroup non-O157; and Shiga toxin-positive, not serogrouped.

§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

	Spotted Fever Rickettsiosis (including RMSF)[†]									
	Confirmed					Probable				
	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009
Reporting area		Med	Max				Med	Max		
United States	—	2	10	12	11	—	15	72	65	215
New England	—	0	1	—	—	—	0	2	1	2
Connecticut	—	0	0	—	—	—	0	0	—	—
Maine[§]	—	0	0	—	—	—	0	2	1	1
Massachusetts	—	0	1	—	—	—	0	1	—	1
New Hampshire	—	0	0	—	—	—	0	1	—	—
Rhode Island[§]	—	0	0	—	—	—	0	0	—	—
Vermont[§]	—	0	1	—	—	—	0	0	—	—
Mid. Atlantic	—	0	3	2	—	—	1	6	6	7
New Jersey	—	0	0	—	—	—	0	0	—	—
New York (Upstate)	—	0	1	—	—	—	0	3	1	1
New York City	—	0	1	—	—	—	0	4	5	4
Pennsylvania	—	0	2	2	—	—	0	2	—	2
E.N. Central	—	0	2	—	1	—	0	7	—	10
Illinois	—	0	1	—	—	—	0	6	—	6
Indiana	—	0	2	—	—	—	0	2	—	—
Michigan	—	0	1	—	1	—	0	1	—	—
Ohio	—	0	0	—	—	—	0	4	—	4
Wisconsin	—	0	0	—	—	—	0	1	—	—
W.N. Central	—	0	3	—	2	—	2	23	5	8
Iowa	—	0	1	—	—	—	0	1	—	—
Kansas	—	0	1	—	1	—	0	0	—	—
Minnesota	—	0	1	—	—	—	0	1	—	—
Missouri	—	0	1	—	—	—	2	22	5	8
Nebraska[§]	—	0	2	—	1	—	0	1	—	—
North Dakota	—	0	0	—	—	—	0	0	—	—
South Dakota	—	0	0	—	—	—	0	0	—	—
S. Atlantic	—	1	8	7	6	—	4	25	39	150
Delaware	—	0	1	1	—	—	0	3	4	1
District of Columbia	—	0	0	—	—	—	0	0	—	—
Florida	—	0	1	—	—	—	0	2	1	1
Georgia	—	0	7	5	6	—	0	0	—	—
Maryland[§]	—	0	1	—	—	—	0	3	3	12
North Carolina	—	0	1	1	—	—	1	24	27	119
South Carolina[§]	—	0	1	—	—	—	0	4	2	5
Virginia[§]	—	0	1	—	—	—	0	5	2	11
West Virginia	—	0	0	—	—	—	0	1	—	1
E.S. Central	—	0	2	2	1	—	4	15	9	25
Alabama[§]	—	0	1	—	—	—	1	7	2	8
Kentucky	—	0	1	1	—	—	0	0	—	—
Mississippi	—	0	0	—	1	—	0	1	1	—
Tennessee[§]	—	0	2	1	—	—	2	14	6	17
W.S. Central	—	0	3	1	—	—	1	25	5	10
Arkansas[§]	—	0	0	—	—	—	0	14	—	3
Louisiana	—	0	0	—	—	—	0	1	—	—
Oklahoma	—	0	3	—	—	—	0	24	1	1
Texas[§]	—	0	1	1	—	—	0	11	4	6
Mountain	—	0	2	—	1	—	0	3	—	3
Arizona	—	0	2	—	1	—	0	2	—	1
Colorado	—	0	1	—	—	—	0	0	—	—
Idaho[§]	—	0	0	—	—	—	0	1	—	—
Montana[§]	—	0	1	—	—	—	0	2	—	—
Nevada[§]	—	0	0	—	—	—	0	1	—	—
New Mexico[§]	—	0	0	—	—	—	0	0	—	1
Utah	—	0	0	—	—	—	0	0	—	1
Wyoming[§]	—	0	1	—	—	—	0	1	—	—
Pacific	—	0	1	—	—	—	0	0	—	—
Alaska	—	0	0	—	—	—	0	0	—	—
California	—	0	1	—	—	—	0	0	—	—
Hawaii	—	0	0	—	—	—	0	0	—	—
Oregon	—	0	0	—	—	—	0	0	—	—
Washington	—	0	0	—	—	—	0	0	—	—
American Samoa	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—

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[†] Illnesses with similar clinical presentation that result from Spotted fever group rickettsia infections are reported as Spotted fever rickettsioses. Rocky Mountain spotted fever (RMSF) caused by *Rickettsia rickettsii*, is the most common and well-known spotted fever.

[§] Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)[*]

Reporting area	*Streptococcus pneumoniae*,[†] invasive disease										Syphilis, primary and secondary				
	All ages					Age <5									
	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009	Current week	Previous 52 weeks		Cum 2010	Cum 2009
		Med	Max				Med	Max				Med	Max		
United States	223	55	394	4,776	1,269	32	45	128	786	912	72	247	388	2,579	3,980
New England	2	1	51	172	26	—	1	23	12	31	6	6	21	99	99
Connecticut	—	0	50	45	—	—	0	22	2	—	—	0	9	11	23
Maine[§]	1	1	5	38	4	—	0	2	4	—	—	0	3	8	1
Massachusetts	—	0	1	—	1	—	0	5	—	24	6	4	12	66	63
New Hampshire	—	0	6	41	5	—	0	2	3	5	—	0	1	3	8
Rhode Island[§]	—	0	5	15	10	—	0	1	2	—	—	0	5	9	4
Vermont[§]	1	0	6	33	6	—	0	1	1	2	—	0	2	2	—
Mid. Atlantic	23	4	27	282	68	5	5	48	89	97	33	34	50	497	547
New Jersey	—	0	4	27	—	—	1	3	16	18	4	3	13	65	79
New York (Upstate)	5	2	12	63	32	3	2	19	47	46	4	2	11	29	29
New York City	7	0	10	25	3	2	0	28	7	27	17	20	39	302	346
Pennsylvania	11	2	19	167	33	—	0	5	19	6	8	7	14	101	93
E.N. Central	15	13	73	661	265	4	8	16	126	146	1	25	54	165	392
Illinois	—	0	7	39	—	—	1	5	33	15	—	10	36	7	191
Indiana	—	5	20	147	98	—	1	4	14	27	1	2	9	20	51
Michigan	4	1	26	226	13	1	1	6	34	26	—	3	13	56	61
Ohio	11	8	18	158	154	3	2	7	36	53	—	7	13	82	69
Wisconsin	—	0	20	91	—	—	0	2	9	25	—	0	3	—	20
W.N. Central	20	3	60	327	66	3	3	12	68	65	1	5	12	60	91
Iowa	—	0	0	—	—	—	0	0	—	—	—	0	2	1	10
Kansas	2	1	6	43	32	—	0	2	7	11	—	0	3	1	4
Minnesota	17	0	45	180	—	3	0	10	33	16	—	1	4	13	24
Missouri	—	1	8	45	26	—	1	3	20	29	—	3	8	42	50
Nebraska[§]	1	0	7	51	—	—	0	2	7	2	1	0	2	3	1
North Dakota	—	0	4	4	8	—	0	1	—	3	—	0	1	—	2
South Dakota	—	0	2	4	—	—	0	2	1	4	—	0	1	—	—
S. Atlantic	53	26	140	1,352	617	3	10	26	206	241	16	60	200	686	878
Delaware	—	0	3	10	10	—	0	2	—	—	—	0	3	2	11
District of Columbia	—	0	3	13	—	—	0	1	3	—	3	3	8	33	55
Florida	35	15	89	691	369	1	4	18	93	90	3	18	28	227	339
Georgia	2	8	24	177	184	—	3	9	49	67	—	14	151	73	133
Maryland[§]	11	0	25	183	4	1	1	7	23	31	4	6	12	80	80
North Carolina	—	0	0	—	—	—	0	0	—	—	2	9	31	142	143
South Carolina[§]	5	0	25	221	—	1	1	4	19	23	2	2	6	42	28
Virginia[§]	—	0	2	18	—	—	1	3	16	22	2	6	22	87	87
West Virginia	—	1	20	39	50	—	0	3	3	8	—	0	2	—	2
E.S. Central	9	4	50	454	119	—	2	9	44	53	6	20	40	197	362
Alabama[§]	—	0	0	—	—	—	0	0	—	—	—	6	18	47	149
Kentucky	—	1	8	43	38	—	0	2	4	6	—	1	13	25	20
Mississippi	—	0	5	24	3	—	0	2	5	6	—	5	17	36	60
Tennessee[§]	9	2	44	387	78	—	2	7	35	41	6	7	15	89	133
W.S. Central	71	2	62	643	44	14	6	38	107	133	—	46	74	335	824
Arkansas[§]	4	1	8	63	22	—	0	4	9	16	—	5	16	66	53
Louisiana	—	0	8	34	22	—	0	3	9	16	—	10	27	64	276
Oklahoma	2	0	5	23	—	2	1	5	23	20	—	1	6	13	33
Texas[§]	65	0	56	523	—	12	3	34	66	81	—	29	46	192	462
Mountain	24	2	82	775	62	3	6	12	118	133	3	8	18	81	153
Arizona	10	0	51	380	—	—	3	7	54	63	1	4	11	18	68
Colorado	14	0	20	215	—	3	1	4	30	22	—	2	5	33	30
Idaho[§]	—	0	1	5	—	—	0	2	2	2	—	0	1	1	2
Montana[§]	—	0	1	5	—	—	0	0	—	—	—	0	1	—	—
Nevada[§]	—	1	4	29	23	—	0	2	3	5	1	1	10	23	31
New Mexico[§]	—	0	8	65	—	—	0	4	12	12	1	1	4	6	15
Utah	—	1	9	69	32	—	1	5	15	28	—	0	2	—	7
Wyoming[§]	—	0	2	7	7	—	0	1	2	1	—	0	1	—	—
Pacific	6	0	14	110	2	—	0	7	16	13	6	39	55	459	634
Alaska	—	0	9	48	—	—	0	5	13	8	—	0	0	—	—
California	6	0	12	62	—	—	0	2	3	—	3	35	54	422	561
Hawaii	—	0	1	—	2	—	0	2	—	5	—	0	3	10	12
Oregon	—	0	0	—	—	—	0	0	—	—	—	1	5	6	11
Washington	—	0	0	—	—	—	0	0	—	—	3	2	7	21	50
American Samoa	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—	1	3	17	54	49
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

[*] Incidence data for reporting years 2009 and 2010 are provisional.

[†] Includes drug resistant and susceptible cases of invasive *Streptococcus pneumoniae* disease among children <5 years and among all ages. Case definition: Isolation of *S. pneumoniae* from a normally sterile body site (e.g., blood or cerebrospinal fluid).

[§] Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending April 17, 2010, and April 18, 2009 (15th week)*

Reporting area	Varicella (chickenpox)§					West Nile virus disease†									
						Neuroinvasive					Nonneuroinvasive¶				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2010	Cum 2009
United States	242	281	637	4,311	7,741	—	1	46	2	—	—	0	49	—	1
New England	3	15	37	175	334	—	0	0	—	—	—	0	0	—	—
Connecticut	—	7	23	43	160	—	0	0	—	—	—	0	0	—	—
Maine§	2	4	15	76	62	—	0	0	—	—	—	0	0	—	—
Massachusetts	—	0	0	—	2	—	0	0	—	—	—	0	0	—	—
New Hampshire	1	3	10	41	70	—	0	0	—	—	—	0	0	—	—
Rhode Island§	—	0	2	3	4	—	0	0	—	—	—	0	0	—	—
Vermont§	—	0	4	12	36	—	0	0	—	—	—	0	0	—	—
Mid. Atlantic	20	22	56	313	620	—	0	2	—	—	—	0	1	—	—
New Jersey	N	0	0	N	N	—	0	1	—	—	—	0	0	—	—
New York (Upstate)	N	0	0	N	N	—	0	1	—	—	—	0	1	—	—
New York City	—	0	0	—	—	—	0	1	—	—	—	0	0	—	—
Pennsylvania	20	22	56	313	620	—	0	0	—	—	—	0	0	—	—
E.N. Central	50	108	205	1,689	2,777	—	0	4	—	—	—	0	3	—	—
Illinois	1	25	56	410	702	—	0	3	—	—	—	0	0	—	—
Indiana§	5	7	30	184	191	—	0	1	—	—	—	0	1	—	—
Michigan	22	37	84	551	797	—	0	1	—	—	—	0	0	—	—
Ohio	22	29	81	475	879	—	0	0	—	—	—	0	2	—	—
Wisconsin	—	7	57	69	208	—	0	1	—	—	—	0	0	—	—
W.N. Central	11	10	40	184	483	—	0	5	—	—	—	0	11	—	—
Iowa	N	0	0	N	N	—	0	0	—	—	—	0	1	—	—
Kansas§	2	3	15	59	121	—	0	1	—	—	—	0	2	—	—
Minnesota	—	0	0	—	—	—	0	1	—	—	—	0	1	—	—
Missouri	7	6	30	102	320	—	0	2	—	—	—	0	1	—	—
Nebraska§	N	0	0	N	N	—	0	2	—	—	—	0	6	—	—
North Dakota	2	0	26	21	36	—	0	0	—	—	—	0	1	—	—
South Dakota	—	0	2	2	6	—	0	3	—	—	—	0	2	—	—
S. Atlantic	41	25	78	590	901	—	0	4	—	—	—	0	2	—	—
Delaware§	—	0	2	2	2	—	0	0	—	—	—	0	0	—	—
District of Columbia	—	0	1	1	11	—	0	1	—	—	—	0	0	—	—
Florida§	25	14	57	312	556	—	0	1	—	—	—	0	1	—	—
Georgia	N	0	0	N	N	—	0	1	—	—	—	0	0	—	—
Maryland§	N	0	0	N	N	—	0	0	—	—	—	0	1	—	—
North Carolina	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
South Carolina§	—	0	34	43	142	—	0	2	—	—	—	0	0	—	—
Virginia§	2	0	11	104	28	—	0	2	—	—	—	0	0	—	—
West Virginia	14	8	25	128	162	—	0	0	—	—	—	0	0	—	—
E.S. Central	5	6	29	73	211	—	0	6	2	—	—	0	4	—	—
Alabama§	5	6	27	73	208	—	0	0	—	—	—	0	0	—	—
Kentucky	N	0	0	N	N	—	0	1	—	—	—	0	0	—	—
Mississippi	—	0	2	—	3	—	0	5	2	—	—	0	4	—	—
Tennessee§	N	0	0	N	N	—	0	2	—	—	—	0	1	—	—
W.S. Central	95	68	261	905	1,762	—	0	19	—	—	—	0	6	—	—
Arkansas§	5	0	31	69	42	—	0	1	—	—	—	0	0	—	—
Louisiana	—	0	7	18	24	—	0	2	—	—	—	0	4	—	—
Oklahoma	N	0	0	N	N	—	0	2	—	—	—	0	2	—	—
Texas§	90	65	245	818	1,696	—	0	16	—	—	—	0	4	—	—
Mountain	17	18	57	371	604	—	0	12	—	—	—	0	17	—	1
Arizona	—	0	0	—	—	—	0	4	—	—	—	0	2	—	—
Colorado§	11	8	22	138	231	—	0	7	—	—	—	0	14	—	—
Idaho§	N	0	0	N	N	—	0	3	—	—	—	0	5	—	—
Montana§	4	0	17	77	83	—	0	1	—	—	—	0	1	—	—
Nevada§	N	0	0	N	N	—	0	2	—	—	—	0	1	—	—
New Mexico§	—	0	6	25	49	—	0	2	—	—	—	0	1	—	—
Utah	2	7	32	130	241	—	0	1	—	—	—	0	1	—	1
Wyoming§	—	0	1	1	—	—	0	1	—	—	—	0	2	—	—
Pacific	—	1	5	11	49	—	0	12	—	—	—	0	12	—	—
Alaska	—	0	4	11	28	—	0	0	—	—	—	0	0	—	—
California	—	0	0	—	—	—	0	8	—	—	—	0	6	—	—
Hawaii	—	0	4	—	21	—	0	0	—	—	—	0	0	—	—
Oregon	N	0	0	N	N	—	0	1	—	—	—	0	4	—	—
Washington	N	0	0	N	N	—	0	6	—	—	—	0	3	—	—
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	2	4	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	2	7	30	63	171	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

* Incidence data for reporting years 2009 and 2010 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly.

† Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for California serogroup, eastern equine, Powassan, St. Louis, and western equine diseases are available in Table I.

§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

¶ Not reportable in all states. Data from states where the condition is not reportable are excluded from this table, except starting in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm.

TABLE III. Deaths in 122 U.S. cities,[*] week ending April 17, 2010 (15th week)

Reporting area	All causes, by age (years)						P&I[†] Total
	All Ages	≥65	45–64	25–44	1–24	<1	
New England	497	364	94	18	10	11	50
Boston, MA	132	85	31	7	5	4	12
Bridgeport, CT	29	23	5	1	—	—	3
Cambridge, MA	13	10	3	—	—	—	—
Fall River, MA	19	19	—	—	—	—	1
Hartford, CT	44	33	9	1	—	1	3
Lowell, MA	24	19	4	1	—	—	3
Lynn, MA	7	5	2	—	—	—	—
New Bedford, MA	15	9	4	2	—	—	1
New Haven, CT	32	25	5	—	2	—	4
Providence, RI	48	34	10	1	1	2	5
Somerville, MA	2	2	—	—	—	—	—
Springfield, MA	44	31	8	3	—	2	6
Waterbury, CT	22	20	2	—	—	—	—
Worcester, MA	66	49	11	2	2	2	12
Mid. Atlantic	1,740	1,204	388	84	25	39	101
Albany, NY	43	30	11	2	—	—	1
Allentown, PA	23	17	5	1	—	—	2
Buffalo, NY	86	53	17	10	2	4	7
Camden, NJ	28	22	4	1	—	1	2
Elizabeth, NJ	19	12	6	1	—	—	2
Erie, PA	44	33	11	—	—	—	3
Jersey City, NJ	21	13	6	2	—	—	1
New York City, NY	843	612	180	29	6	16	47
Newark, NJ	31	18	8	1	2	2	1
Paterson, NJ	14	6	6	1	1	—	3
Philadelphia, PA	275	165	65	25	10	10	12
Pittsburgh, PA[§]	32	23	9	—	—	—	6
Reading, PA	23	18	3	1	1	—	1
Rochester, NY	78	48	20	4	1	5	4
Schenectady, NY	25	17	6	1	1	—	1
Scranton, PA	32	27	5	—	—	—	—
Syracuse, NY	73	52	16	3	1	1	6
Trenton, NJ	25	17	7	1	—	—	1
Utica, NY	16	12	3	1	—	—	—
Yonkers, NY	9	9	—	—	—	—	1
E.N. Central	2,032	1,358	467	129	32	46	151
Akron, OH	58	44	11	2	—	1	5
Canton, OH	52	32	16	3	1	—	5
Chicago, IL	307	186	84	23	6	8	9
Cincinnati, OH	79	47	22	3	1	6	7
Cleveland, OH	250	172	59	14	3	2	16
Columbus, OH	217	145	49	15	6	2	25
Dayton, OH	142	97	35	7	1	2	11
Detroit, MI	74	40	21	11	1	1	5
Evansville, IN	58	48	6	4	—	—	5
Fort Wayne, IN	79	47	22	6	1	3	6
Gary, IN	16	7	5	4	—	—	1
Grand Rapids, MI	66	50	11	2	1	2	4
Indianapolis, IN	203	134	43	14	5	7	17
Lansing, MI	40	30	7	3	—	—	3
Milwaukee, WI	87	60	19	5	2	1	6
Peoria, IL	50	41	4	2	1	2	5
Rockford, IL	42	32	7	2	1	—	4
South Bend, IN	50	31	9	3	2	5	7
Toledo, OH	101	69	24	6	—	2	5
Youngstown, OH	61	46	13	—	—	2	5
W.N. Central	608	410	144	28	14	10	44
Des Moines, IA	78	56	16	3	1	2	10
Duluth, MN	34	28	4	1	1	—	4
Kansas City, KS	33	16	13	1	—	3	1
Kansas City, MO	115	74	32	8	—	1	9
Lincoln, NE	49	38	10	—	1	—	3
Minneapolis, MN	62	41	13	5	1	2	3
Omaha, NE	88	56	28	2	1	1	6
St. Louis, MO	5	2	1	—	2	—	—
St. Paul, MN	50	36	7	2	5	—	5
Wichita, KS	94	63	20	6	2	1	3
S. Atlantic	1,207	720	322	107	31	25	74
Atlanta, GA	117	68	37	11	1	—	8
Baltimore, MD	141	66	44	22	1	8	9
Charlotte, NC	109	66	25	11	5	2	10
Jacksonville, FL	191	112	61	7	9	2	10
Miami, FL	114	75	25	6	8	—	9
Norfolk, VA	56	30	14	10	1	1	1
Richmond, VA	58	32	18	5	—	1	1
Savannah, GA	60	38	15	5	1	1	4
St. Petersburg, FL	58	39	14	3	1	1	2
Tampa, FL	222	152	45	17	1	7	13
Washington, D.C.	75	39	23	8	3	2	7
Wilmington, DE	6	3	1	2	—	—	—
E.S. Central	914	576	246	59	16	17	98
Birmingham, AL	165	106	42	9	2	6	18
Chattanooga, TN	86	55	25	3	2	1	8
Knoxville, TN	86	69	15	2	—	—	16
Lexington, KY	56	39	12	2	2	1	5
Memphis, TN	179	103	59	13	4	—	21
Mobile, AL	109	71	24	8	1	5	4
Montgomery, AL	59	36	13	8	—	2	6
Nashville, TN	174	97	56	14	5	2	20
W.S. Central	1,241	776	325	67	40	31	75
Austin, TX	92	46	32	8	5	1	2
Baton Rouge, LA	83	50	15	10	6	2	1
Corpus Christi, TX	81	55	25	1	—	—	8
Dallas, TX	205	119	55	8	8	13	14
El Paso, TX	86	62	15	3	4	2	1
Fort Worth, TX	U	U	U	U	U	U	U
Houston, TX	145	86	43	8	4	4	9
Little Rock, AR	75	47	20	5	2	1	6
New Orleans, LA	U	U	U	U	U	U	U
San Antonio, TX	276	180	65	16	10	5	23
Shreveport, LA	55	40	14	—	—	1	7
Tulsa, OK	143	91	41	8	1	2	4
Mountain	1,151	751	268	82	31	14	92
Albuquerque, NM	100	66	22	6	6	—	8
Boise, ID	55	36	16	3	—	—	5
Colorado Springs, CO	78	54	13	7	2	2	4
Denver, CO	85	50	26	5	2	2	8
Las Vegas, NV	277	186	65	18	6	1	23
Ogden, UT	36	28	5	2	1	—	4
Phoenix, AZ	185	106	50	17	6	5	14
Pueblo, CO	36	23	11	2	—	—	1
Salt Lake City, UT	114	68	26	14	3	3	8
Tucson, AZ	185	134	34	8	5	1	17
Pacific	1,507	1,044	328	79	36	20	143
Berkeley, CA	4	3	1	—	—	—	—
Fresno, CA	115	76	29	6	4	—	12
Glendale, CA	33	25	8	—	—	—	2
Honolulu, HI	69	53	11	4	1	—	5
Long Beach, CA	63	40	18	3	2	—	11
Los Angeles, CA	268	174	57	19	11	7	24
Pasadena, CA	36	29	6	1	—	—	5
Portland, OR	100	60	31	5	2	2	5
Sacramento, CA	202	153	36	8	3	2	30
San Diego, CA	165	117	37	6	4	1	11
San Francisco, CA	116	77	29	4	2	4	12
San Jose, CA	U	U	U	U	U	U	U
Santa Cruz, CA	37	26	5	6	—	—	2
Seattle, WA	110	68	25	11	4	2	4
Spokane, WA	72	54	14	2	1	1	10
Tacoma, WA	117	89	21	4	2	1	10
Total[¶]	10,897	7,203	2,582	653	235	213	828

U: Unavailable. —: No reported cases.

[*] Mortality data in this table are voluntarily reported from 122 cities in the United States, most of which have populations of >100,000. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

[†] Pneumonia and influenza.

[§] Because of changes in reporting methods in this Pennsylvania city, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

[¶] Total includes unknown ages.

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